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BIOASSAY OF 5-CHLORO-o-TOLUIDINE FOR POSSIBLE CARCINOGENICITY

CAS No. 95-79-4

NCI-CG-TR-187

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE Public Health Service
National Institutes of Health





DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE National Institutes of Health

REPORT ON BIOASSAY OF 5-CHLORO-O-TOLUIDINE FOR POSSIBLE CARCINOGENICITY

Availability

5-Chloro-o-toluidine (CAS 95-79-4) has been tested for cancercausing activity with rats and mice in the Carcinogenesis Testing Program, Division of Cancer Cause and Prevention, National Cancer Institute. A report is available to the public.

Summary: A bioassay for the possible carcinogenicity of 5-chloro-o-toluidine was conducted using Fischer 344 rats and B6C3F1 mice.

Applications of the chemical include use as an intermediate in the manufacture of dyes. 5-Chloro-o-toluidine was administered in the feed, at either of two concentrations, to groups of 50 male and 50 female animals of each species.

Under the conditions of this bioassay, 5-chloro-o-toluidine was carcinogenic to B6C3F1 mice, inducing hemangiosarcomas and hepatocell-ular carcinomas in both males and females. There was no conclusive evidence of the carcinogenicity of the compound in Fischer 344 rats.

Single copies of the report, Bioassay of 5-Chloro-o-toluidine for Possible Carcinogenicity (T.R. 187), are available from the Office of Cancer Communications, National Cancer Institute, Building 31, Room 10A21, National Institutes of Health, Bethesda, Maryland 20014.

Dated: January 26, 1979

Director National Institutes of Health

(Catalogue of Federal Domestic Assistance Program Number 13.393, Cancer Cause and Prevention Research)



BIOASSAY OF

5-CHLORO-o-TOLUIDINE

FOR POSSIBLE CARCINOGENICITY

Carcinogenesis Testing Program
Division of Cancer Cause and Prevention
National Cancer Institute
National Institutes of Health
Bethesda, Maryland 20014

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Public Health Service
National Institutes of Health

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REPORT ON THE BIOASSAY OF 5-CHLORO-o-TOLUIDINE FOR POSSIBLE CARCINOGENICITY

CARCINOGENESIS TESTING PROGRAM
DIVISION OF CANCER CAUSE AND PREVENTION
NATIONAL CANCER INSTITUTE, NATIONAL INSTITUTES OF HEALTH

FOREWORD: This report presents the results of the bioassay of 5-chloro-o-toluidine conducted for the Carcinogenesis Testing Program, Division of Cancer Cause and Prevention, National Cancer Institute (NCI), National Institutes of Health, Bethesda, Maryland. This is one of a series of experiments designed to determine whether selected chemicals have the capacity to produce cancer in animals. Negative results, in which the test animals do not have a significantly greater incidence of cancer than control animals, do not necessarily mean the test chemical is not a carcinogen because the experiments are conducted under a limited set of circumstances. Positive results demonstrate that the test chemical is carcinogenic for animals under the conditions of the test and indicate a potential risk to man. The actual determination of the risk to man from animal carcinogens requires a wider analysis.

CONTRIBUTORS: This bioassay of 5-chloro-o-toluidine was conducted by Litton Bionetics, Inc., Kensington, Maryland, initially under direct contract to the NCI and currently under a subcontract to Tracor Jitco, Inc., prime contractor for the NCI Carcinogenesis Testing Program.

The experimental design was determined by the NCI Project Officers, Dr. N. P. Page (1,2), Dr. E. K. Weisburger (1) and Dr. J. H. Weisburger (1,3). The principal investigators for the contract were Dr. F. M. Garner (4) and Dr. B. M. Ulland (4,5). Mr. S. Johnson (4) was the coprincipal investigator for the contract. Animal treatment and observation were supervised by Mr. R. Cypher (4), Mr. D. S. Howard (4) and Mr. H. D. Thornett (4); Mr. H. Paulin (4) analyzed dosed feed mixtures. Ms. J. Blalock (4) was responsible for data collection and assembly.

Histopathologic examinations were performed at Litton Bionetics, Inc. (4), and the slides for mice were reviewed by Dr. A. DePaoli (4). The slides for rats were reviewed at Experimental Pathology Laboratories, Inc. (6). The rat pathology narrative was written by Dr. J. F. Hardisty (6), the mouse pathology narrative was written by Dr. A. DePaoli (4), and the diagnoses included in this report represent the interpretation of these pathologists. Histopathology findings and reports were reviewed by Dr. R. L. Schueler (7).

Compilation of individual animal survival, pathology and summary tables was performed by EG&G Mason Research Institute (8); the statistical analysis was performed by Mr. R. M. Helfand (9) and Dr. J. P. Dirkse, III (10), using methods selected for the Carcinogenesis Testing Program by Dr. J. J. Gart (11).

This report was prepared at METREK, a Division of The MITRE Corporation (9) under the direction of the NCI. Those responsible for this report at METREK are the project coordinator, Dr. L. W. Thomas (9), task leader Ms. P. Walker (9), senior biologist Mr. M. Morse (9), biochemist Mr. S. C. Drill (9), chemist Dr. N. Zimmerman (9), and technical editor Ms. P. A. Miller (9). The final report was reviewed by members of the participating organizations.

The following other scientists at the National Cancer Institute were responsible for evaluating the bioassay experiment, interpreting the results, and reporting the findings: Dr. K. C. Chu (1), Dr. C. Cueto, Jr. (1), Dr. J. F. Douglas (1), Dr. R. A. Griesemer (1), Dr. T. E. Hamm (1), Dr. W. V. Hartwell (1), Dr. M. H. Levitt (1), Dr. H. A. Milman (1), Dr. T. W. Orme (1), Dr. A. R. Patel (1), Dr. S. F. Stinson (1), Dr. J. M. Ward (1), and Dr. C. E. Whitmire (1).

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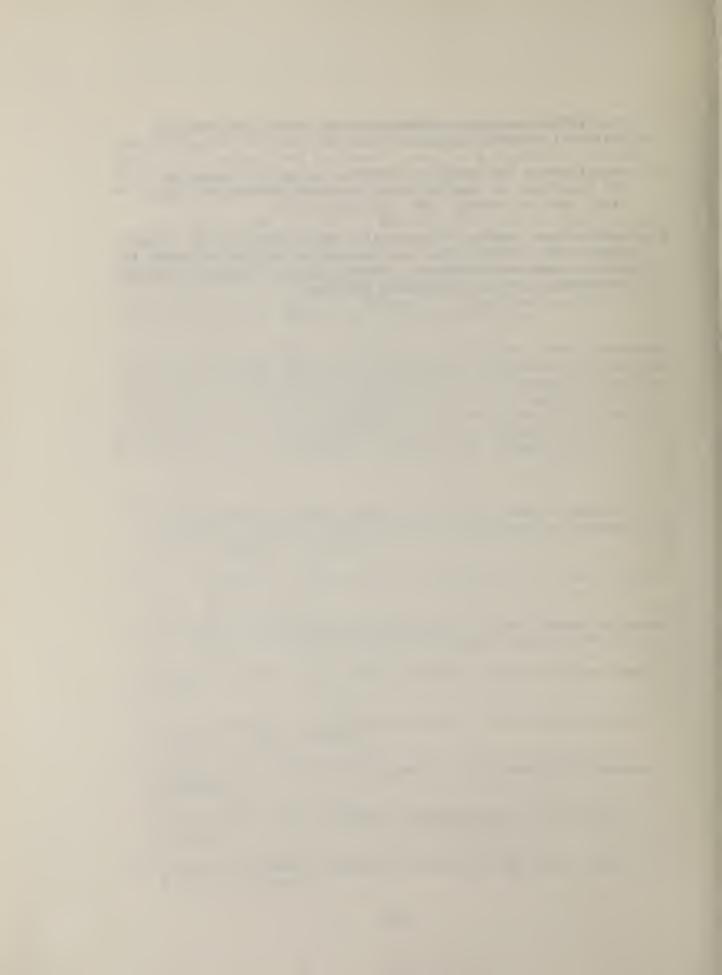
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SUMMARY

A bioassay for the possible carcinogenicity of 5-chloro-o-toluidine was conducted using Fischer 344 rats and B6C3Fl mice. 5-Chloro-o-toluidine was administered in the feed, at either of two concentrations, to groups of 50 male and 50 female animals of each species. Twenty animals of each sex and species were placed on test as controls. The high and low dietary concentrations of 5-chloro-o-toluidine were 5000 and 2500 ppm for rats and 4000 and 2000 ppm for mice. The compound was administered for 78 weeks to both rats and mice, followed by an observation period of up to 26 weeks for rats and 13 weeks for mice.

There were significant positive associations between the concentrations of 5-chloro-o-toluidine administered and mortality among male and female mice, but not among rats of either sex. Adequate numbers of animals in all groups survived sufficiently long to be at risk from late-developing tumors. Distinct mean body weight depression was apparent when dosed female rats and dosed mice of both sexes were compared to their controls, indicating that the concentrations administered to these animals in this bioassay may have approximated the maximum tolerated concentrations. Since no mean body weight depression, relative to controls, no significantly accelerated mortality, and no signs of toxicity other than fatty metamorphosis of the liver were associated with administration of 5-chloro-o-toluidine to male rats, it is possible that these animals may have been able to tolerate a higher dietary concentration.

There was a significant positive association between the concentration of 5-chloro-o-toluidine administered to male rats and the incidence of adrenal pheochromocytomas in these animals; however, neither of the Fisher exact comparisons was significant. None of the other statistical tests for tumors at any site in male or female rats indicated a significant positive association between dosage and incidence.

In mice of both sexes there were significant positive associations between concentration administered and the incidence of hemangiosarcomas. In addition, the high dose to control Fisher exact comparisons for both sexes were significant. The Cochran-Armitage tests were also significant and positive for the incidences of hepatocellular carcinomas in both sexes of mice. For males and females, the high dose to control Fisher exact comparisons were significant, and for females the low dose to control comparison was also significant.

Under the conditions of this bioassay, 5-chloro-o-toluidine was carcinogenic to B6C3Fl mice, inducing hemangiosarcomas and hepatocellular carcinomas in both males and females. There was no conclusive evidence of the carcinogenicity of the compound in Fischer 344 rats.

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I. INTRODUCTION

5-Chloro-o-toluidine (Figure 1) (NCI No. CO2051), an aromatic amine and dye intermediate, was selected for bioassay by the National Cancer Institute because of the high incidence of bladder cancer observed among workers in the dye manufacturing industry (Anthony and Thomas, 1970; Wynder et al., 1963). Aromatic amines are one of several classes of compounds thought to be responsible for this increased cancer risk (Clayson and Garner, 1976).

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(1977) name for this compound is 5-chloro-2-methylbenzenamine.* It

is also called p-chloro-o-aminotoluene; 4-chloro-2-aminotoluene;

2-amino-4-chlorotoluene; o-amino-p-chlorotoluene; 5-chloro-2-methylaniline; 2-methyl-5-chloroaniline; 1-amino-2-methyl-5-chlorobenzene;

1-amino-3-chloro-6-methylbenzene; Fast Red KB Base; Azogene Fast Red

KB; Brentamine Fast Red KB Base; Naphthosol Fast Red KB Base; and

Naphthanil Red KB Base.

Both 5-chloro-o-toluidine and its hydrochloride salt are used as C.I. (Colour Index) Azoic Diazo Component 32, a component of azoic dyes (Society of Dyers and Colourists, 1956b). Azoic dyes are formed on textile fibers, especially cellulose, by the reaction of selected diazo and coupling components. C.I. Azoic Diazo Component 32 is also recommended for dyeing silk and nylon (Society of Dyers and Colourists, 1956a).

^{*}The CAS registry number is 95-79-4.

Specific production data for 5-chloro-o-toluidine are not available; however, this compound and/or its hydrochloride salt are currently produced or sold in commercial quantities (in excess of 1000 pounds or \$1000 in value annually) as C.I. Azoic Diazo Component 32 by one U.S. company (U.S. International Trade Commission, 1977).

U.S. imports of 5-chloro-o-toluidine amounted to 42,163 pounds in 1974 (U.S. International Trade Commission, 1976).

The potential for exposure to 5-chloro-o-toluidine is greatest for workers in the chemical and dye manufacturing and textile industries.

II. MATERIALS AND METHODS

A. Chemicals

Technical-grade 5-chloro-o-toluidine was purchased from E.I. duPont de Nemours & Company, Wilmington, Delaware. Chemical analysis was performed by Litton Bionetics, Inc., Kensington, Maryland. The experimentally determined refractive index was $n_D^{20} = 1.5831$. Thin-layer chromatography was performed utilizing two solvent systems (i.e., benzene:methanol and diethyl ether:ethyl acetate:acetic acid). Each plate, visualized with ultraviolet and visible light, iodine vapor, and ferric chloride-potassium ferricyanide spray, revealed one single spot. Only one homogeneous peak was observed using gas chromatography. The results of infrared and nuclear magnetic resonance analyses were consistent with those expected based on the structure of the compound.

Throughout this report, the term 5-chloro-o-toluidine is used to represent this technical-grade material.

B. Dietary Preparation

The basal laboratory diet for both dosed and control animals consisted of Wayne Lab-Blox® meal (Allied Mills, Inc., Chicago, Illinois). 5-Chloro-o-toluidine was administered to the dosed animals as a component of the diet.

The chemical was removed from its container and a proper amount was blended with an aliquot of the feed using a mortar and pestle.

Once visual homogeneity was attained, the mixture was placed in a 6

kg capacity Patterson-Kelley standard model twin-shell stainless steel V-blender along with the remainder of the feed to be prepared. After 20 minutes of blending, the mixtures were placed in double plastic bags and stored in the dark at 4°C. The mixture was prepared once weekly.

C. Animals

The two animal species, Fischer 344 rats and B6C3F1 mice, used in the carcinogenicity bioassay were obtained through contracts of the Division of Cancer Treatment, National Cancer Institute. Rats were supplied by A. R. Schmidt, Madison, Wisconsin; Laboratory Supply Company, Inc., Indianapolis, Indiana; and Charles River Breeding Laboratories, Inc., Wilmington, Massachusetts. Mice were supplied by A. R. Schmidt and Charles River Breeding Laboratories, Inc.

Rats and mice, approximately 4 weeks old when received, were examined and any obviously ill or runted animals were killed. The remaining animals were quarantined for 2 weeks prior to initiation of test. Animals which did not manifest clinical signs of disease were assigned to groups and distributed among cages so that the average body weight per cage was approximately equal for a given species and sex.

D. Animal Maintenance

Animals were housed by species in rooms maintained at 22° to 26°C and 45 to 55 percent relative humidity. Incoming air was filtered through HEPA filters (Flanders Filters, McLean, Virginia)

at a rate of 12 to 15 complete changes of room air per hour. Fluorescent lighting was provided 8 hours per day (9:00 a.m. to 5:00 p.m.).

Animals were housed by species in separate rooms. Rats were housed four per cage by sex and mice five per cage by sex. Polycarbonate cages (Lab Products, Inc., Garfield, New Jersey) suspended from aluminum racks, were used for dosed and control animals. Racks were fitted with a continuous piece of stainless steel mesh over which a sheet of filter paper was firmly secured. Filter paper was changed at 2-week intervals, when the racks were sanitized. Clean cages and hardwood chip bedding (Ab-sorb-dri®, Wilner Wood Products Company, Norway, Maine) were provided twice weekly.

Acidulated water (pH 2.5) was supplied ad libitum to animals in water bottles which were changed and washed twice weekly. Sipper tubes were washed at weekly intervals. During the period of chemical administration, dosed and control animals received ad libitum treated or untreated Wayne Lab-Blox® meal as appropriate. The feed was supplied in hanging stainless steel hoppers which were refilled three times per week and sanitized weekly.

Dosed and control rats were housed in a room with other rats receiving diets containing* 3-chloro-p-toluidine (95-74-9); 2-nitro-p-phenylenediamine (5307-14-2); and nitrofen (1836-75-5).

^{*}CAS registry numbers are given in parentheses.

Dosed and control mice were housed in a room with mice receiving diets containing Michler's ketone (90-94-8); 4,4'-methylenebis (N,N-dimethyl)benzenamine (101-61-1); p-chloroaniline (106-47-8); N-phenyl-p-phenylenediamine hydrochloride (2198-59-6); 1-phenyl-2-thiourea (103-85-5); trimethylthiourea (2489-77-2); dibutyltin diacetate (1067-33-0); and 2-nitro-p-phenylenediamine (5307-14-2).

E. Selection of Initial Concentrations

To establish the concentrations of 5-chloro-o-toluidine for administration to dosed animals in the chronic studies, subchronic toxicity tests were conducted with both rats and mice. Animals of each species were distributed among six groups, each consisting of five males and five females. 5-Chloro-o-toluidine was incorporated into the basal laboratory diet and supplied ad libitum to five of the six rat groups in concentrations of 315, 680, 1465, 3155 and 6800 ppm and to five of the six mouse groups in concentrations of 255, 550, 1180, 2550 and 5500 ppm. The remaining group of each species served as a control group, receiving only the basal laboratory diet.

The dosed dietary preparations were administered for a period of 4 weeks, followed by a 2-week observation period during which all animals were fed the basal laboratory diet. Individual body weights were recorded twice weekly throughout the study. Upon termination of the study all survivors were euthanized and necropsied.

The following table indicates the mean body weight gain, relative to controls, survival and incidence of abnormal signs observed in each of the rat groups at the end of the subchronic test.

RAT SUBCHRONIC STUDY RESULTS

	Mean Body Weight Gain (%) ^a		Survival ^b		Observation of b	
ppm	Males	Females	Males	Females	Males	Females
5800 3155	- 35 + 23	- 21 - 3	5/5 5/5	5/5 5/5	5/5c,d 5/5c,d 5/5c,d	5/5 ^c 5/5 ^c
1465 680	- 19 + 8	+ 3 + 5	5/5 5/5	5/5 5/5	5/5c,d	5/5 ^c 5/5 ^c
315 0	+ 18	+ 4	5/5 5/5	5/5 5/5	5/5c,d 0/5	5/5 ^c 0/5

The high concentration selected for administration to dosed rats in the chronic bioassay was 5000 ppm.

The following table indicates the mean body weight gain, relative to controls, and survival observed in each of the mouse groups at the end of the subchronic test.

MOUSE SUBCHRONIC STUDY RESULTS

	Mean Bo	ody Weight		ь	
	Gai	in (%)	Survival		
ppm	Males	Females	Males	Females	
5500		- 5	0/5	5/5	
2550	+ 7	- 3	5/5	5/5	
1180	+ 5	0	5/5	5/5	
550	+ 3	- 6	5/5	5/5	
255	+16	- 2	5/5	5/5	
0			5/5	5/5	

a+ is indicative of mean body weight gain greater than that of controls.

⁻ is indicative of mean body weight gain less than that of controls.

bNumber of animals observed/number of animals originally in group.

CThese rats had mottled livers.

dThese rats had spotted kidneys.

No other abnormalities which could be attributed to administration of the compound were observed. The high concentration selected for administration to dosed mice in the chronic bioassay was 4000 ppm.

F. Experimental Design

The experimental design parameters for the chronic study (species, sex, group size, concentrations administered, and duration of treated and untreated observation periods) are summarized in Tables 1 and 2.

Rats were approximately 6 weeks old at the time the test was initiated and all were placed on test on the same day. Dosed rats were supplied with diets containing 5000 and 2500 ppm 5-chloro-o-toluidine for 78 weeks followed by an observation period of up to 26 weeks, when no test chemicals were used. Throughout this report those rats receiving the former concentration are referred to as the high dose groups and those receiving the latter concentration are referred to as the low dose groups.

All mice were approximately 6 weeks old at the time the test was initiated and were placed on test on the same day. Dosed mice were supplied with diets containing 4000 and 2000 ppm 5-chloro-o-toluidine for 78 weeks followed by a 13-week observation period, when no test chemicals were used. Throughout this report those mice receiving the former concentration are referred to as the high dose groups and those receiving the latter concentration are referred to as the low dose groups.

TABLE 1

DESIGN SUMMARY FOR FISCHER 344 RATS
5-CHLORO-o-TOLUIDINE FEEDING EXPERIMENT

	INITIAL GROUP SIZE	5-CHLORO-o- TOLUIDINE CONCENTRATION ^a		ON PERIOD UNTREATED (WEEKS)
MALE				
CONTROL	20	0	0	104
LOW DOSE	50	2500 0	78	26
HIGH DOSE	50	5000 0	78	25
FEMALE				
CONTROL	20	0	0	104
LOW DOSE	50	2500 0	78	26
HIGH DOSE	50 .	5000 0	78	25

^aConcentrations given in parts per million.

TABLE 2

DESIGN SUMMARY FOR B6C3F1 MICE
5-CHLORO-o-TOLUIDINE FEEDING EXPERIMENT

	INITIAL GROUP SIZE	5-CHLORO-o- TOLUIDINE CONCENTRATION ^a	OBSERVAT TREATED (WEEKS)	ION PERIOD UNTREATED (WEEKS)
MALE				
CONTROL	20	0	0	91
LOW DOSE	50	2000	78	13
HIGH DOSE	50	4000 0	78	13
FEMALE				
CONTROL	20	0	0	91
LOW DOSE	50	2000 0	78	13
HIGH DOSE	50	4000 0	78	13

aConcentrations given in parts per million.

G. Clinical and Histopathologic Examinations

Animals were weighed immediately prior to initiation of the experiment. Body weights of rats were recorded once a week for the first 6 weeks, every 2 weeks for the next 12 weeks, once a month for the next 32 weeks, and at 8-week intervals for the remainder of the bioassay. Body weights of mice were recorded once a week for the first 6 weeks, every 2 weeks for the next 12 weeks, and at monthly intervals thereafter. Animals were inspected twice daily. Food consumption data were collected at monthly intervals from 20 percent of the animals in each group.

All moribund animals, animals that developed large, palpable masses that jeopardized their health, or animals that survived until the end of the bioassay were euthanized using carbon dioxide inhalation. Necropsies were immediately performed on these animals and on all animals found dead during the bioassay. Gross and microscopic examinations were performed on all major tissues, organs, and gross lesions taken from sacrificed animals and, whenever possible, from animals found dead.

Tissues were preserved in a 10 percent neutral buffered formalin solution, embedded in paraffin, sectioned, and stained with hematoxylin and eosin prior to microscopic examination.

Slides were prepared from the following tissues: skin, subcutaneous tissue, lungs and bronchi, trachea, bone marrow, spleen, lymph nodes, thymus, heart, salivary gland, liver, gallbladder (mice),

pancreas, esophagus, stomach, small intestine, large intestine, kidney, urinary bladder, pituitary, adrenal, thyroid, parathyroid, testis, prostate, brain, uterus, mammary gland, and ovary.

A few tissues were not examined for some animals, particularly for those that died early. Also, some animals were missing, cannibalized, or judged to be in such an advanced state of autolysis as to preclude histopathologic interpretation. Thus, the number of animals for which particular organs, tissues, or lesions were examined microscopically varies and does not necessarily represent the number of animals that were recorded in each group at the time that the test was initiated.

H. Data Recording and Statistical Analyses

Pertinent data on this experiment have been recorded in an automatic data processing system, the Carcinogenesis Bioassay Data System (Linhart et al., 1974). The data elements include descriptive information on the chemicals, animals, experimental design, clinical observations, survival, body weight, and individual pathologic results, as recommended by the International Union Against Cancer (Berenblum, 1969). Data tables were generated for verification of data transcription and for statistical review.

These data were analyzed using the statistical techniques described in this section. Those analyses of the experimental results that bear on the possibility of carcinogenicity are discussed in the statistical narrative sections.

Probabilities of survival were estimated by the product-limit procedure of Kaplan and Meier (1958) and are presented in this report in the form of graphs. Animals were statistically censored as of the time that they died of other than natural causes or were found to be missing; animals dying from natural causes were not statistically censored. Statistical analyses for a possible dose-related effect on survival used the method of Cox (1972) when testing two groups for equality and used Tarone's (1975) extensions of Cox's methods when testing a dose-related trend. One-tailed P-values have been reported for all tests except the departure from linearity test, which is only reported when its two-tailed P-value is less than 0.05.

The incidence of neoplastic or nonneoplastic lesions has been given as the ratio of the number of animals bearing such lesions at a specific anatomic site (numerator) to the number of animals in which that site was examined (denominator). In most instances, the denominators included only those animals for which that site was examined histologically. However, when macroscopic examination was required to detect lesions prior to histologic sampling (e.g., skin or mammary tumors), or when lesions could have appeared at multiple sites (e.g., lymphomas), the denominators consist of the numbers of animals necropsied.

The purpose of the statistical analyses of tumor incidence is to determine whether animals receiving the test chemical developed a significantly higher proportion of tumors than did the control animals. As a part of these analyses, the one-tailed Fisher exact test (Cox, 1970, pp. 48-52) was used to compare the tumor incidence of a control group to that of a group of treated animals at each dose level. When results for a number of treated groups, k, are compared simultaneously with those for a control group, a correction to ensure an overall significance level of 0.05 may be made. The Bonferroni inequality (Miller, 1966, pp. 6-10) requires that the P-value for any comparison be less than or equal to 0.05/k. In cases where this correction was used, it is discussed in the narrative section. It is not, however, presented in the tables, where the Fisher exact P-values are shown.

The Cochran-Armitage test for linear trend in proportions, with continuity correction (Armitage, 1971, pp. 362-365), was also used when appropriate. Under the assumption of a linear trend, this test determined if the slope of the dose-response curve is different from zero at the one-tailed 0.05 level of significance. Unless otherwise noted, the direction of the significant trend was a positive dose relationship. This method also provides a two-tailed test of departure from linear trend.

A time-adjusted analysis was applied when numerous early deaths resulted from causes that were not associated with the formation of tumors. In this analysis, deaths that occurred before the first tumor was observed were excluded by basing the statistical tests on animals that survived at least 52 weeks, unless a tumor was found at the

anatomic site of interest before week 52. When such an early tumor was found, comparisons were based exclusively on animals that survived at least as long as the animal in which the first tumor was found.

Once this reduced set of data was obtained, the standard procedures for analyses of the incidence of tumors (Fisher exact tests, Cochran-Armitage tests, etc.) were followed.

When appropriate, life-table methods were used to analyze the incidence of tumors. Curves of the proportions surviving without an observed tumor were computed as in Saffiotti et al. (1972). The week during which animals died naturally or were sacrificed was entered as the time point of tumor observation. Cox's methods of comparing these curves were used for two groups; Tarone's extension to testing for linear trend was used for three groups. The statistical tests for the incidence of tumors which used life-table methods were one-tailed and, unless otherwise noted, in the direction of a positive dose relationship. Significant departures from linearity (P < 0.05, two-tailed test) were also noted.

The approximate 95 percent confidence interval for the relative risk of each dosed group compared to its control was calculated from the exact interval on the odds ratio (Gart, 1971). The relative risk is defined as p_t/p_c where p_t is the true binomial probability of the incidence of a specific type of tumor in a treated group of animals and p_c is the true probability of the spontaneous incidence of the same type of tumor in a control group. The hypothesis of equality

between the true proportion of a specific tumor in a treated group and the proportion in a control group corresponds to a relative risk of unity. Values in excess of unity represent the condition of a larger proportion in the treated group than in the control.

The lower and upper limits of the confidence interval of the relative risk have been included in the tables of statistical analyses. The interpretation of the limits is that in approximately 95 percent of a large number of identical experiments, the true ratio of the risk in a treated group of animals to that in a control group would be within the interval calculated from the experiment. When the lower limit of the confidence interval is greater than one, it can be inferred that a statistically significant result (a P < 0.025 one-tailed test when the control incidence is not zero, P < 0.050 when the control incidence is zero) has occurred. When the lower limit is less than unity but the upper limit is greater than unity, the lower limit indicates the absence of a significant result while the upper limit indicates that there is a theoretical possibility of the induction of tumors by the test chemical which could not be detected under the conditions of this test.

III. CHRONIC TESTING RESULTS: RATS

A. Body Weights and Clinical Observations

The mean body weights of dosed male rats were slightly lower than that of the controls from week 15 until week 80. Distinct mean body weight depression, in comparison with their controls, was observed in dosed female rats throughout the bioassay (Figure 2).

No other clinical signs were recorded.

B. Survival

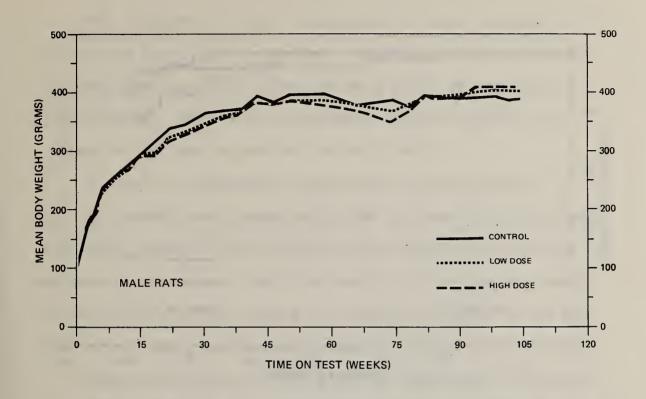
The estimated probabilities of survival for male and female rats in the control and 5-chloro-o-toluidine-dosed groups are shown in Figure 3. The Tarone test for association between dosage and mortality was not significant for either males or females.

There were adequate numbers of male rats at risk from latedeveloping tumors, as 94 percent (47/50) of the high dose, 78 percent (39/50) of the low dose, and 85 percent (17/20) of the controls survived on test until the termination of the study.

There were adequate numbers of female rats at risk from latedeveloping tumors, as 92 percent (46/50) of the high dose, 80 percent (40/50) of the low dose, and 75 percent (15/20) of the controls survived on test until the termination of the study.

C. Pathology

Histopathologic findings on neoplasms in rats are summarized in Appendix A (Tables Al and A2); findings on nonneoplastic lesions are summarized in Appendix C (Tables Cl and C2).



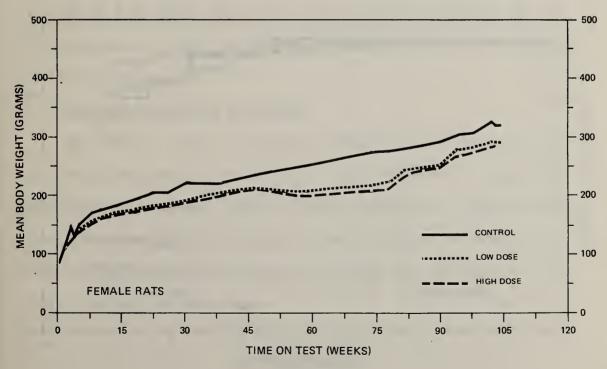
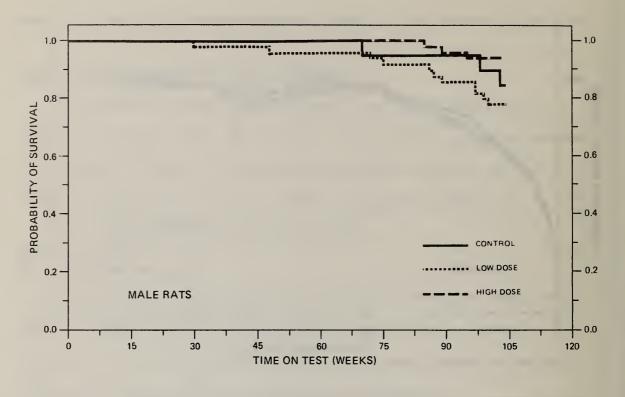


FIGURE 2
GROWTH CURVES FOR 5-CHLORO-0-TOLUIDINE CHRONIC STUDY RATS



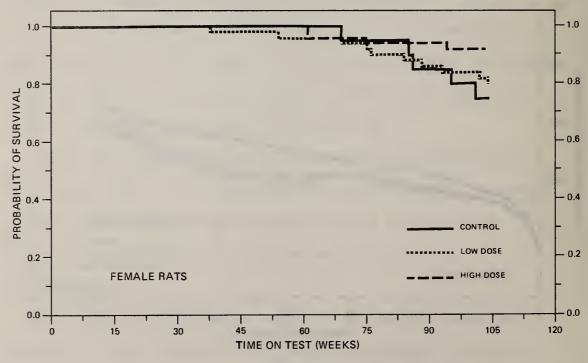


FIGURE 3
SURVIVAL COMPARISONS OF 5-CHLORO-o-TOLUIDINE CHRONIC STUDY RATS

Most neoplasms were seen at approximately equal incidence in the control and dosed rats. A few types of neoplasms occurred only, or with increased incidence, in rats of dosed groups as compared with control groups. The nature and incidence of these neoplasms are similar to that seen in aged rats of this strain.

A variety of inflammatory, degenerative and proliferative lesions commonly seen in aged Fischer 344 rats were observed in dosed and control animals. None of these lesions appeared to be related to exposure to the compound, with the exception of fatty metamorphosis of the liver, which was observed in increased incidences in the dosed rats of both sexes when compared to control groups.

Based on the results of this pathology examination, the administration of 5-chloro-o-toluidine, at the dosage levels used, was not carcinogenic to Fischer 344 male and female rats under the conditions of this bioassay.

D. Statistical Analyses of Results

The results of the statistical analyses of tumor incidence in rats are summarized in Tables 3 and 4. The analysis is included for every type of malignant tumor in either sex where at least two such tumors were observed in at least one of the control or 5-chloro-o-toluidine-dosed groups and where such tumors were observed in at least 5 percent of the group.

TABLE 3

- 自動語

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN MALE RATS TREATED WITH 5-CHLORO-o-TOLUIDINE^a

TOPOGRAPHY: MORPHOLOGY	CONTROL	LOW	HIGH DOSE
Skin and Subcutaneous Tissue: Fibroadenoma ^b	1/20(0.05)	2/50(0.04)	6/50(0.12)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		0.800 0.045 46.273	2.400 0.325 108.021
Weeks to First Observed Tumor	103	100	103
Hematopoietic System: Leukemia or Malignant Lymphoma ^b	2/20(0.10)	4/50(0.08)	1/50(0.02)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit	111	0.800 0.128 8.436	0.200 0.004 3.681
Weeks to First Observed Tumor	98	86	103
Adrenal: Pheochromocytoma	0/20(0.00)	2/49(0.04)	7/48(0.15)
P Values ^c	P = 0.019	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		Infinite 0.125 Infinite	Infinite 0.843 Infinite
Weeks to First Observed Tumor		97	103

TABLE 3 (CONTINUED)

		LOW	HIGH
TOPOGRAPHY: MORPHOLOGY	CONTROL	DOSE	DOSE
Pancreatic Islets: Islet-Cell Adenoma ^b	0/20(0.00)	4/45(0.09)	0/45(0.00)
P Values ^c	N.S.	N.S.	N.S.
Departure from Linear Trend ^e	P = 0.018		
Relative Risk (Control) ^d	;	Infinite	1
Lower Limit	1	0.429	1
Upper Limit	-	Infinite	
Weeks to First Observed Tumor		100	1
Testis: Interstitial-Cell Tumor ^b	18/20(0.90)	47/50(0.94)	47/50(0.94)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d		1.044	1.044
Lower Limit Upper Limit		0.918 1.246	0.918 1.246
Weeks to First Observed Tumor	103	72	68
Body Cavities: Mesothelioma	1/20(0.05)	0/50(0.00)	3/50(0.06)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d	;	0.000	1.200
Lower Limit	-	0.000	0.106
Upper Limit		7.475	61.724
Weeks to First Observed Tumor	104	1	103

TABLE 3 (CONCLUDED)

 $^{
m a}_{
m Treated}$ groups received doses of 2500 or 5000 ppm in feed.

 $^{
m b}$

given beneath the incidence of tumors in the treated group when P < 0.05; otherwise, not significant (N.S.) is indicated. For both Cochran-Armitage and Fisher exact tests a negative designathe control group when P < 0.05; otherwise, not significant (N.S.) is indicated. The probability ^cThe probability level for the Cochran-Armitage test is given beneath the incidence of tumors in level for the Fisher exact test for the comparison of a treated group with the control group is tion (N) indicates a lower incidence in the treated group(s) than in the control group,

drhe 95% confidence interval on the relative risk of the treated group to the control group.

^eThe probability level of the test for departure from linear trend is given beneath the control group when P < 0.05.

TABLE 4

SPECIFIC SITES IN FEMALE RATS TREATED WITH 5-CHLORO-o-TOLUIDINE ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT

TOPOGRAPHY: MORHPOLOGY	CONTROL	LOW	HIGH
Pituitary: Chromophobe Carcinoma or Chromophobe Adenoma ^b	5/20(0.25)	6/43(0.14)	7/46(0.15)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit Upper Limit		0.558 0.166 2.084	0.609 0.196 2.196
Weeks to First Observed Tumor	85	7.5	103
Thyroid: C-Cell Carcinoma ^b	1/16(0.06)	0/41(0.00)	5/47(0.11)
P Values	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit		0.000	1.702
Upper Limit	1	7.266	78.693
Weeks to First Observed Tumor	104		103
Thyroid: C-Cell Carcinoma or C-Cell Adenoma ^b	2/16(0.13)	1/41(0.02)	6/47(0.13)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d	1	0.195	1.021
Lower Limit Upper Limit		0.004 3.555	0.213 9.783
Weeks to First Observed Tumor	104	104	103

TABLE 4 (CONTINUED)

		LOW	HIGH
TOPOGRAPHY: MORPHOLOGY	CONTROL	DOSE	DOSE
Mammary Gland: Fibroadenoma ^b	1/20(0.05)	10/50(0.20)	5/50(0.10)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d	-	4.000	2.000
Lower Limit Upper Limit		169.457	92.596
Weeks to First Observed Tumor	104	102	103
Mammary Gland: Fibroadenoma, Adeno- carcinoma NOS or Cystadenoma NOS ^b	2/20(0.10)	10/50(0.20)	6/50(0.12)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d Lower Limit		2.000	1.200
Upper Limit	1 1	17.808	11.574
Weeks to First Observed Tumor	101	102	103
Uterus: Endometrial Stromal Polyp $^{ m b}$	0/18(0.00)	4/49(0.08)	1/47(0.02)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d		Infinite	Infinite
Lower Limit Upper Limit	# # # #	U.35/ Infinite	0.021 Infinite
Weeks to First Observed Tumor		104	103

^aTreated groups received doses of 2500 or 5000 ppm in feed.

 $^{
m b}_{
m Number}$ of tumor-bearing animals/number of animals examined at site (proportion).

the control group when P < 0.05; otherwise, not significant (N.S.) is indicated. The probability given beneath the incidence of tumors in the treated group when P < 0.05; otherwise, not signifi-^cThe probability level for the Cochran-Armitage test is given beneath the incidence of tumors in level for the Fisher exact test for the comparison of a treated group with the control group is cant (N.S.) is indicated. For both Cochran-Armitage and Fisher exact tests a negative designation (N) indicates a lower incidence in the treated group(s) than in the control group.

drhe 95% confidence interval on the relative risk of the treated group to the control group.

The Cochran-Armitage test indicated a significant (P = 0.019)

positive association between dose and the incidence of pheochromo
cytomas of the adrenal in male rats. However, neither of the Fisher

exact tests was significant.

None of the other statistical tests for any site indicated a significant association between dose and tumor incidence. Thus, there was not sufficient evidence to indicate the carcinogenicity of 5-chloro-o-toluidine in Fischer 344 rats of either sex.

To provide additional insight into the possible carcinogenicity of this compound, 95 percent confidence intervals on the relative risk have been estimated and entered in the tables based upon the observed tumor incidence rates. In many of the intervals shown in Tables 3 and 4, the value one is included; this indicates the absence of statistically significant results. It should also be noted that many of the confidence intervals have an upper limit greater than one, indicating the theoretical possibility of tumor induction in rats by 5-chloro-o-toluidine that could not be established under the conditions of this test.

IV. CHRONIC TESTING RESULTS: MICE

A. Body Weights and Clinical Observations

Distinct and consistent dose-related mean body weight depression was apparent in male mice. The mean body weights of dosed female mice were consistently lower than that for the controls after week 20; however, no dose-related effect was observed (Figure 4).

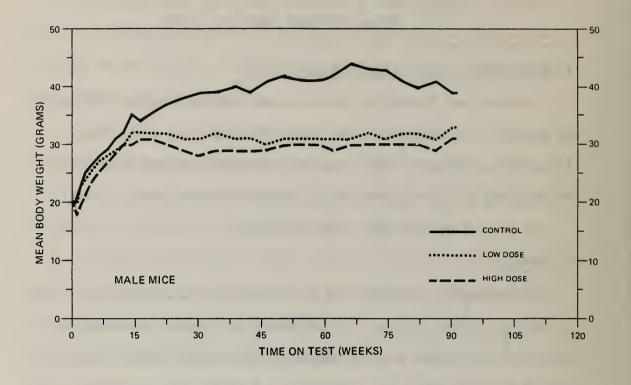
No other clinical signs were recorded.

B. Survival

The estimated probabilities of survival for male and female mice in the control and 5-chloro-o-toluidine-dosed groups are shown in Figure 5. The Tarone test for association between dosage and mortality was significant for both males (P < 0.001) and females (P = 0.039). In addition, the Cox test was significant when comparing the high dose males with their controls (P = 0.001).

There were adequate numbers of male mice at risk from latedeveloping tumors, as all males survived on test for at least 64 weeks and 46 percent (23/50) of the high dose, 82 percent (41/50) of the low dose and 95 percent (19/20) of the controls survived on test until the termination of the study. Two high dose males were missing in week 34.

There were adequate numbers of female mice at risk from latedeveloping tumors, as 62 percent (31/50) of the high dose, 86 percent (43/50) of the low dose and 90 percent (18/20) of the controls survived on test until the termination of the study.



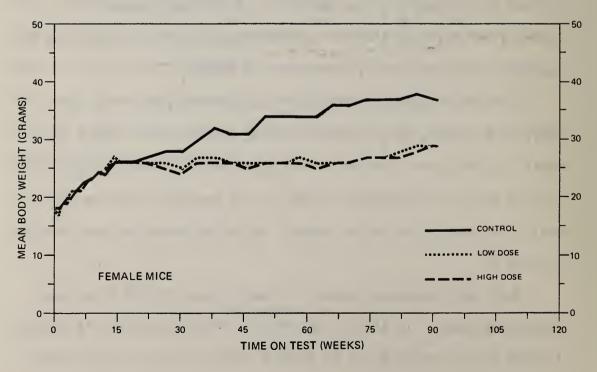


FIGURE 4
GROWTH CURVES FOR 5-CHLORO-o-TOLUIDINE CHRONIC STUDY MICE

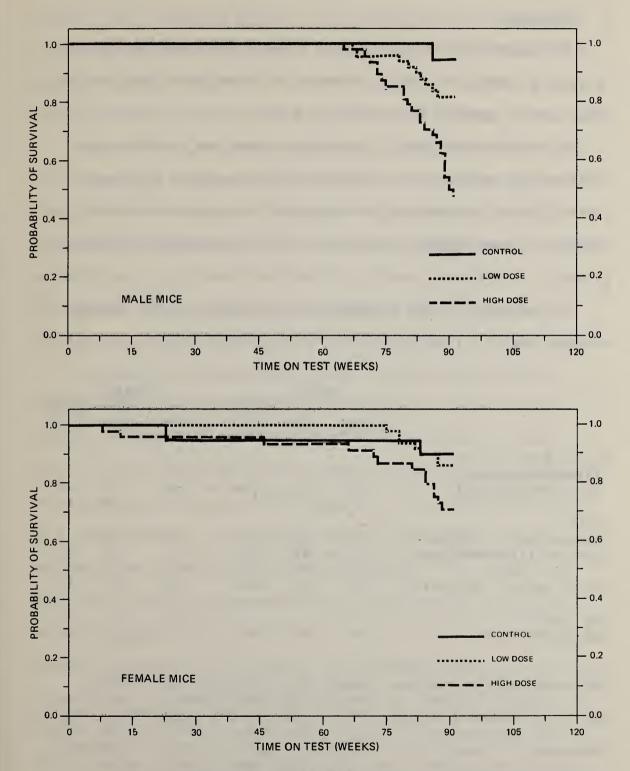


FIGURE 5
SURVIVAL COMPARISONS OF 5-CHLORO-o-TOLUIDINE CHRONIC STUDY MICE

C. Pathology

Histopathologic findings on neoplasms in mice are summarized in Appendix B (Tables B1 and B2); findings on nonneoplastic lesions are summarized in Appendix D (Tables D1 and D2).

An increased incidence of hemangiosarcomas and hepatocellular neoplasms was observed in the dosed groups as compared with the control groups. In addition, a variety of other tumors commonly observed in aged B6C3F1 mice occurred in both the control and dosed groups.

The incidence of the hepatocellular neoplasms and the hemangiosarcomas was as follows:

	М	ALES		FE	MALES	
		LOW	HIGH		LOW	HIGH
	CONTROL	DOSE	DOSE	CONTROL	DOSE	DOSE
No. of Animals with						
Tissues Examined	(00)	(50)	(17)	(00)	(50)	((0)
Histopathologically	(20)	(50)	(47)	(20)	(50)	(43)
LIVER						
Hepatocellular Adenoma	0	1	2	0	2	5
Hepatocellular Carcinoma	4	19	25	0	19	26
nepatotellalai vaielnoma	· ·			ŭ		
No. of Animals Necropsied	(20)	(50)	(48)	(20)	(50)	(43)
·						
ALL SITES						
Hemangiosarcoma	1	11	37	0	6	22

The hepatocellular neoplasms ranged from grossly evident nodular masses to lesions discernable only on microscopic examination. The neoplasms, irrespective of size, were irregular in shape. Adenomas generally were smaller, occurring within the confines of a liver

lobule. They compressed adjacent liver parenchyma and were made up of a relatively uniform population of hepatocytes which differed from normal hepatocytes by their increased cytoplasmic basophilia, occasional increased size and failure to form uniform hepatic plates.

Hepatocellular carcinomas were usually larger than hepatocellular adenomas and were composed of variably sized cells showing varying degrees of cytomegaly and cellular atypia. These cells were arranged in sheets, with trabecular or pseudoacinar patterns. Tumor necrosis was not uncommon, particularly in larger specimens. Atypical mitoses, local invasion and/or metastases, usually pulmonary, verified the malignant nature of these lesions.

The hemangiosarcomas varied in size from microscopic foci to grossly evident small red nodules. While a few of these lesions seemed to originate in the spleen, perirenal tissue and skeletal muscle, most lesions in male mice developed in the periepidydimal fat or adjacent pelvic tissues and in females in the periuterine pelvic fat. Histologically, the hemangiosarcomas varied considerably but all demonstrated some degree of vascular pattern. The smallest and apparently earliest lesions were characterized by foci of ectatic vascular channels filled with blood, some being partially or completely occluded by fibrin thrombi. Such channels were lined for the most part by normal-appearing endothelium. However, the neoplastic nature of these lesions was indicated by the presence of foci of larger spindle-shaped epithelioid cells lining some of the

channels. Inflammatory cells, primarily neutrophils, were not uncommon in these early lesions. Most lesions, particularly the larger ones, were composed almost entirely of these atypical endothelial cells. In some specimens, these cells became highly pleomorphic, ranging from spindle-shaped to irregularly round to multinucleated giant cells. In these more anaplastic lesions, neoplastic cells occurred in solid sheets, the vascular nature of the lesion being masked. Mitotic figures, even in the highly anaplastic lesions, usually were very few to nonexistent. The highly malignant nature of these lesions was evident in the tendency toward local invasion and metastases most common to the lung, heart and spleen.

A number of degenerative, proliferative, and inflammatory changes were encountered in dosed and control animals, which are commonly observed in aging B6C3F1 mice. A few of these lesions may be related to compound administration. Such lesions and their incidences are as follows:

	M	IALES		FE	MALES	
	CONTROL	LOW	HIGH DOSE	CONTROL	LOW DOSE	HIGH DOSE
No. of Animals with Tissues Examined						
Histopathologically	(20)	(50)	(47)	(20)	(50)	(43)
LIVER						
Cytoplasmic Change	0	18	11	0	10	7
Hyperplasia	0	4	7	0	0	0
BONE MARROW	(19)	(47)	(45)	(19)	(48)	(37)
Myelosclerosis	0	0	0	7	42	32
KIDNEY Glomerulonephritis	(20) 0	(50) 2	(47) 11	(19) 0	(48) 0	(43)

The hepatocytic cytoplasmic change and hyperplasia may represent "preneoplastic" compound-induced changes. The marked increase of myelosclerosis in the dosed versus the control females suggested amplification of this process in the dosed groups. The glomerulone-phritis was usually mild. The glomerular changes were characterized by hypercellularity and irregular thickening of basement membrane. While a specific diagnosis requires thin sections and/or electron microscopy, the changes observed are consistent with a membranoproliferative lesion.

Based on the results of this pathology examination, 5-chloro-o-toluidine was carcinogenic to B6C3Fl mice, inducing hemangiosarcomas and hepatocellular adenomas and hepatocellular carcinomas under the conditions of this bioassay.

D. Statistical Analyses of Results

The results of the statistical analyses of tumor incidence in mice are summarized in Tables 5 and 6. The analysis is included for every type of malignant tumor in either sex where at least two such tumors were observed in at least one of the control or 5-chloro-o-toluidine-dosed groups and where such tumors were observed in at least 5 percent of the group.

In male mice the Cochran-Armitage test indicated a significant (P < 0.001) positive association between dose and the incidence of hemangiosarcomas. This was supported by a significant (P < 0.001) positive Fisher exact high dose to control comparison. The test for

TABLE 5

ANALYSES OF THE INCIDENCE OF PRIMARY TUMORS AT SPECIFIC SITES IN MALE MICE TREATED WITH 5-CHLORO-o-TOLUIDINE $^{\rm a}$

TOPOGRAPHY: MORPHOLOGY	CONTROL	LOW DOSE	HIGH
Lung: Alveolar/Bronchiolar Carcinoma or Alveolar/Bronchiolar Adenoma ^b	2/20(0.10)	2/50(0.04)	2/48(0.04)
P Values ^C	N.S.	N.S.	N.S.
Relative Risk (Control) ^d	-	0.400	0.417
Lower Limit	1	0.032	0.033
Upper Limit	1	5.277	5.490
Weeks to First Observed Tumor	98	91	06
All Sites: Hemangiosarcoma	1/20(0.05)	11/50(0.22)	37/48(0.77)
P Values ^C	P < 0.001	N.S.	P < 0.001
Departure from Linear Trend ^e	P = 0.038		
Relative Risk (Control) ^d	-	4.400	15.417
Lower Limit Upper Limit		0.722 184.752	3.072 569.778
Weeks to First Observed Tumor	91	80	29
Liver: Hepatocellular Carcinoma	4/20(0.20)	19/50(0.38)	25/47(0.53)
P Values ^C	P = 0.007	N.S.	P = 0.011
Relative Risk (Control) ^d		1.900	2.660
Lower Limit Upper Limit		0.752 6.909	1.106
Weeks to First Observed Tumor	98	65	29
	and the second s		

TABLE 5 (CONCLUDED)

THE CANADA STATE OF S	TOURINGO	LOW	HIGH
TOPOGRAPHY: MORPHOLOGY	CONTROL	DOSE	DOSE
Liver: Hepatocellular Carcinoma or			
Hepatocellular Adenoma ^b	4/20(0.20)	20/50(0.40)	27/47(0.57)
P Values ^c	P = 0.003	N.S.	P = 0.005
Relative Risk (Control) ^d	1	2.000	2.872
Lower Limit	!	0.799	1.210
Upper Limit		7.225	9.830
Weeks to First Observed Tumor	98	65	29

 $^{\mathrm{a}}\mathrm{Treated}$ groups received doses of 2000 or 4000 ppm in feed.

b_{Number} of tumor-bearing animals/number of animals examined at site (proportion).

level for the Fisher exact test for the comparison of a treated group with the control group is given beneath the incidence of tumors in the treated group when P < 0.05; otherwise, not signifithe control group when P < 0.05; otherwise, not significant (N.S.) is indicated. The probability ^CThe probability level for the Cochran-Armitage test is given beneath the incidence of tumors in cant (N.S.) is indicated. For both Cochran-Armitage and Fisher exact tests a negative designation (N) indicates a lower incidence in the treated group(s) than in the control group.

dance of the confidence interval on the relative risk of the treated group to the control group.

^eThe probability level of the test for departure from linear trend is given beneath the control group when P <

TABLE 6

ANALYSES OF THE INCIDENCE OR PRIMARY TUMORS AT SPECIFIC SITES IN FEMALE MICE TREATED WITH 5-CHLORO-o-TOLUIDINE $^{\rm a}$

	TO CHILLIANCE	LOW	HIGH
TOPUGKAPHY: MUKPHULUGY	CONTROL	DOSE	DOSE
All Sites: Hemangiosarcoma	0/20(0.00)	6/50(0.12)	22/43(0.51)
P Values ^c	P < 0.001	N.S.	P < 0.001
Relative Risk (Control) ^d Lower Limit		Infinite 0.667	Infinite 3.487
Upper Limit	1	Infinite	Infinite
Weeks to First Observed Tumor		91	94
Alveolar/Bronchiolar Adenoma ^D	1/20(0.05)	0/48(0.00)	3/43(0.07)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d		0.000	1.395
Lower Limit	1	0.000	0.123
Upper Limit		7.780	71.517
Weeks to First Observed Tumor	91	-	86
Hematopoietic System: Leukemia or			
Malignant Lymphomab	2/20(0.10)	6/50(0.12)	4/43(0.09)
P Values ^c	N.S.	N.S.	N.S.
Relative Risk (Control) ^d	and the state of	1.200	0.930
Lower Limit	-	0.243	0.149
Upper Limit		11.574	9.757
Weeks to First Observed Tumor	83	83	88

TABLE 6 (CONCLUDED)

TOPOGRAPHY: MORPHOLOGY		201	TIDTIT
	CONTROL	DOSE	DOSE
Liver: Hepatocellular Carcinomab	0/20(0.00)	19/50(0.38)	26/43(0.60)
P Values ^c	P < 0.001	P < 0.001	P < 0.001
Relative Risk (Control) ^d Lower Limit Upper Limit		Infinite 2.548 Infinite	Infinite 4.183 Infinite
Weeks to First Observed Tumor	-	75	99
Liver: Hepatocellular Carcinoma or Hepatocellular Adenoma ^b	0/20(0.00)	21/50(0.42)	31/43(0.72)
P Values ^c	P < 0.001	P < 0.001	P < 0.001
Relative Risk (Control) ^d Lower Limit		Infinite 2.840	Infinite 5.076
Upper Limit	-	infinite	infinite
Weeks to first Observed lumor		<i>C/</i>	00

 $^{^{}m a}_{
m Treated}$ groups received doses of 2000 or 4000 ppm in feed.

^bNumber of tumor-bearing animals/number of animals examined at site (proportion).

given beneath the incidence of tumors in the treated group when P < 0.05; otherwise, not signifithe control group when P < 0.05; otherwise, not significant (N.S.) is indicated. The probability level for the Fisher exact test for the comparison of a treated group with the control group is ^CThe probability level for the Cochran-Armitage test is given beneath the incidence of tumors in cant (N.S.) is indicated. For both Cochran-Armitage and Fisher exact tests a negative designation (N) indicates a lower incidence in the treated group(s) than in the control group.

drhe 95% confidence interval on the relative risk of the treated group to the control group.

departure from linear trend was also significant. The Cochran-Armitage test also indicated a significant positive association between dose and the incidence of hepatocellular carcinomas (P = 0.007) and between dose and the combined incidence of hepatocellular carcinomas or hepatocellular adenomas (P = 0.003). These were both supported by significant (P = 0.011 and P = 0.005, respectively) positive Fisher exact high dose to control comparisons.

In female mice significant results were obtained at the same sites as for males. The Cochran-Armitage test indicated a significant (P < 0.001) positive association between dose and the incidence of hemangiosarcomas. A significant (P < 0.001) positive Fisher exact high dose to control comparison supported this finding. The Cochran-Armitage test again indicated significant positive associations between dose and the incidence of hepatocellular carcinomas (P < 0.001) and between dose and the combined incidence of hepatocellular carcinomas or hepatocellular adenomas (P < 0.001). In both cases the Fisher exact high dose to control comparisons (both with P < 0.001) as well as the low dose to control comparisons (both with P < 0.001) indicated significant positive results.

Based on these statistical results, 5-chloro-o-toluidine was carcinogenic to B6C3F1 mice of both sexes under the conditions of this bioassay.

V. DISCUSSION

There were significant positive associations between the concentrations of 5-chloro-o-toluidine administered and mortality among male and female mice, but not among rats of either sex. Adequate numbers of animals in all groups survived sufficiently long to be at risk from late-developing tumors. Distinct mean body weight depression was apparent when dosed female rats and dosed mice of both sexes were compared to their controls, indicating that the concentrations administered to these animals in this bioassay may have approximated the maximum tolerated concentrations. Since no mean body weight depression, relative to controls, no significantly accelerated mortality, and no signs of toxicity other than fatty metamorphosis of the liver were associated with administration of 5-chloro-o-toluidine to male rats, it is possible that these animals may have been able to tolerate a higher dietary concentration.

There was a significant positive association between the concentration of 5-chloro-o-toluidine administered to male rats and the incidence of adrenal pheochromocytomas in these animals; however, neither of the Fisher exact comparisons was significant. None of the other statistical tests for tumors at any site in male or female rats indicated a significant positive association between dosage and incidence.

In mice of both sexes there were significant positive associations between the concentration administered and the incidence of hemangiosarcomas (i.e., 1/20, 11/50, and 37/48 in the control, low dose, and high dose males, respectively, and 0/20, 6/50, and 22/43 in the control, low dose, and high dose females). In addition, the high dose to control Fisher exact comparisons for both sexes were significant. The Cochran-Armitage tests were also significant and positive for the incidences of hepatocellular carcinomas in both sexes (i.e., 4/20, 19/50, and 25/47 in the control, low dose, and high dose males, respectively, and 0/20, 19/50, and 26/43 in the control, low dose, and high dose females). For males and females, the high dose to control Fisher exact comparisons were significant, and for females the low dose to control comparison was also significant.

Under the conditions of this bioassay, 5-chloro-o-toluidine was carcinogenic to B6C3Fl mice, inducing hemangiosarcomas and hepatocellular carcinomas in both males and females. There was no conclusive evidence of the carcinogenicity of the compound in Fischer 344 rats.

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APPENDIX A

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN RATS TREATED WITH 5-CHLORO-o-TOLUIDINE

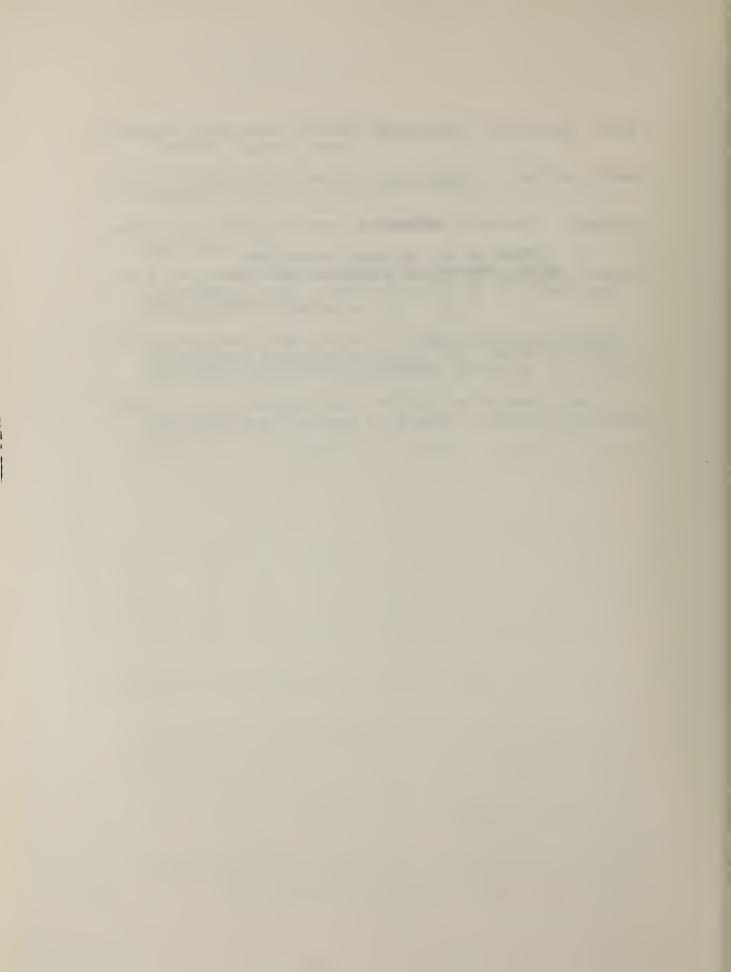


TABLE AI
SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE RATS TREATED WITH
5-CHLORO-o-TOLUIDINE

	CONTROL (UNTR) LOW DOSE 11-1133	HIGH DOSE 11-1131	
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY*	20 20 20 20	50 50 50	50 50 50	
INTEGUMENTARY SYSTEM				
*SKIN SQUAMOUS CELL CARCINOMA BASAL-CELL TUMOR FIBROMA	(20)	(50)	(50) 1 (2%) 1 (2%) 1 (2%)	
*SUBCUT TISSUE ADENCARCINOMA, NOS FIBROMA FIBROSARCOMA	(20) 1 (5%) 1 (5%)	(50) 2 (4%)		
RESPIRATORY SYSTEM				
#LUNG ADENOCARCINOMA, NOS, METASTATIC ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA		(49) 1 (2%)	(50) 1 (2%)	
HEMATOPOIETIC SYSTEM *MULTIPLE ORGANS MALIGNANT LYMPHOMA, NOS LEUKEMIA,NOS MONOCYTIC LEUKEMIA	(20) 1 (5%) 1 (5%)	(50) 2 (4%) 2 (4%)	(50) 1 (2%)	
CIRCULATORY SYSTEM NONE				
DIGESTIVE SYSTEM #SALIVARY GLANDADENOMA_NOS	(19)	(45)	(47) 1 (2%)	

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

^{**}EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE A1 (CONTINUED)

•	CONTROL (UNTR) 11-1135	LOW DOSE 11-1133	HIGH DOSE 11-1131
*LIVER HEPATOCELLULAR CARCINOMA	(23)	(48) 1 (2%)	(50) 1 (2¾)
#STOMACH ADENOCARCINOMA, NOS	(20)	(50) 1 (2%)	(50)
URINARY SYSTEM			
NONE			
ENDOCRINE SYSTEM			
#PITUITARY CHROMOPHOBE ADENOMA MIXED TUMOR, BENIGN	(18) 1 (6%)	(48) 2 (4%) 1 (2%)	(48) 1 (2%)
#ADRENAL PHEOCHROMOCYTOMA	(20)	(49) 2 (4%)	(48) 7 (15%)
#THYROID C-CELL CARCINOMA	(18)	(44) 2 (5%)	(24) 1 (4%)
#PANCREATIC ISLETS ISLET-CELL ADENOMA	(20)	(45) 4 (9%)	(4 5)
REPRODUCTIVE SYSTEM			
*MAMMARY GLAND FIBROADENOMA	(20)	(50)	(5 J) 1 (2%)
#TESTIS INTERSTITIAL-CELL TUMOR	(20) 18 (90%)	(50) 47 (94%)	(50) 47 (94%)
NERVOUS SYSTEM			
*BRAIN EPENDYMOMA	(20) 1 (5%)	(49)	(49)
SPECIAL SENSE ORGANS			
NONE			

 $[\]ensuremath{\mathtt{\#}}$ NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY $\ensuremath{\mathtt{\#}}$ NUMBER OF ANIMALS NECROPSIED

TABLE A1 (CONTINUED)

				=
	CONTROL (UNTR) 11-1135	LOW DOSE 11-1133	HIGH DOSE 11-1131	
MUSCULOSKELETAL SYSTEM				
*SKELETAL MUSCLE SARCOMA, NOS	(20)	(50)	(50) 1 (2%)	
BODY CAVITIES				-
*BODY CAVITIES MESOTHELIOMA, NOS	(20) 1 (5%)	(50)	(5)) 2 (4%)	
*TUNICA VAGINALIS MESOTHELIOMA, NOS	(20)	(50)	(50) 1 (2%)	
ALL OTHER SYSTEMS				
*MULTIPLE ORGANS SARCOMA, NOS	(20)	(50) 1 (2%)	(50)	
ANIMAL DISPOSITION SUMMARY				-
NATURAL DEATHO	20 2 1	50 9	50 1	
MORIBUND SACRIFICE SCHEDULED SACRIFICE ACCIDENTALLY KILLED	1	2	. 2	
TERMINAL SACRIFICE ANIMAL MISSING	17	39	47	
d INCLUDES AUTOLYZED ANIMALS				

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE A1 (CONCLUDED)

	CONTROL (UNTR) 11-1135			
MOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	20 26	49 68	4 7 75	
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	18 2)	48 58	47 65	
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	5 5	10 10	6 7	
TOTAL ANIMALS WITH SECONDARY TUMORS OF TOTAL SECONDARY TUMORS	1			
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS	1		3 3	
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OF METASTATIC TOTAL UNCERTAIN TUMORS				

[#] SECONDARY TUMORS: METASTATIC TUMORS OR TUMORS INVASIVE INTO AN ADJACENT ORGAN

TABLE A2
SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE RATS TREATED WITH
5-CHLORO-0-TOLUIDINE

	CONTROL (UNTR) 11-1136	LOW DOSE 11-1134	HIGH DOSE 11-1132	
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY**	20 20 20	50 50 49	50 50 49	
INTEGUMENTARY SYSTEM				
*SUBCUT TISSUE FIBROSARCOMA	(20)	(50)	(5J) · 1 (2%)	
RESPIRATORY SYSTEM				
#LUNG ALVEOLAR/BRONCHIOLAR ADENOMA	(20) 1 (5%)	(48)	(48) 1 (2%)	
HEMATOPOIETIC SYSTEM				
*MULTIPLE ORGANS MALIGNANT LYMPHOMA, NOS	(20)	(50) 1 (2%)	(50)	
CIRCULATORY SYSTEM				
NONE				
DIGESTIVE SYSTEM				
#LIVER NEOPLASTIC NODULE	(20)	(49) 1 (2%)	(49)	
URINARY SYSTEM				
NONE				
ENDOCRINE SYSTEM				
*PITUITARYCHROMOPHOBE_ADENOMA	(20) <u>5 (25%)</u>	(43) <u>4 (9%)</u>	(46) 7 (15%)	

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED **EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE A2 (CONTINUED)

	CONTROL (UNTR)	LOW DOSE 11-1134	HIGH DOSE 11-1132	
CHROMOPHOBE CARCINOMA		2 (5%)		
MIXED TUMOR, BENIGN		1 (2%)		
ADRENAL	(20)	(48)	(48)	
PHEOCHROMOCYTOMA	1 (5%)		1 (2%)	
#THYROID	(16)	(41)	(47)	
FOLLICULAR-CELL CARCINOMA C-CELL ADENOMA	1 (6%)	1 (2%)	2 (4%) 1 (2%)	
C-CELL CARCINOMA	1 (6%)		5 (11%)	
EPRODUCTIVE SYSTEM				
*MAMMARY GLAND	(20)	(50)	(50)	
ADENOCARCINOMA, NOS CYSTADENOMA, NOS	1 (5%)		1 (2%)	
FIBROMA		1 (2%)		
FIBROADENOMA	1 (5%)	13 (23%)	5 (1)%)	
PREPUTIAL GLAND	(20)	(50)	(50)	
CYSTADENOMA, NOS		1 (2%)		
# UTERUS	(18)	(49)	(47)	
ENDOMETRIAL STROMAL POLYP		4 (8%)	1 (2%)	
#CERVIX UTERI	(18)	(49)	(47)	
LEIOMYOMA			1 (2%)	
ERVOUS SYSTEM				
NONE				
PECIAL SENSE ORGANS				
NONE				
NONE				
USCULOSKELETAL SYSTEM				
NONE				
ODY CAVITIES				

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE A2 (CONCLUDED)

	CONTROL (UNTR) 11-1136	LOW DOSE 11-1134	HIGH DOSE 11-1132	
ALL OTHER SYSTEMS				
*MULTIPLE ORGANS UNDIFFERENTIATED CARCINOMA	(20)	(50) 1 (2%)	(50)	
ANIMAL DISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY	= '	50	50	
NATURAL DEATHA MORIBUND SACRIFICE SCHEDULED SACRIFICE ACCIDENTALLY KILLED	1	8 2	4	
TERMINAL SACRIFICE ANIMAL MISSING	15	4 3	46	
D INCLUDES AUTOLYZED ANIMALS				
TUMOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	8 11	22 27	23	
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	7 10	19 22	14 17	
TOTAL ANIMALS WITH MALIGNANT TUMOR. TOTAL MALIGNANT TUMORS	s 1 1	4	9 9	
	S#			
TOTAL ANIMALS WITH SECONDARY TUMOR TOTAL SECONDARY TUMORS				
	N-	1		
TOTAL SECONDARY TUMORS TOTAL ANIMALS WITH TUMORS UNCERTAI	n -	1		

[#] SECONDARY TUMORS: METASTATIC TUMORS OR TUMORS INVASIVE INTO AN ADJACENT ORGAN



APPENDIX B

SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MICE TREATED WITH 5-CHLORO-o-TOLUIDINE



TABLE BI SUMMARY OF THE INCIDENCE OF NEOPLASMS IN MALE MICE TREATED WITH 5-CHLORO-o-TOLUIDINE

·	CONTROL (UNTR) 22-2135	LOW DOSE 22-2133	HIGH DOSE 22-2131
ANIMALS INITIALLY IN STUDY ANIMALS MISSING	20	50	50 2
ANIMALS DISSING ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY**	20 20	50 50	48 48
INTEGUMENTARY SYSTEM			
*SUBCUT TISSUE HEMANGIOSARCOMA	(20)	(50) 7 (14%)	(48) 4 (8%)
RESPIRATORY SYSTEM			
*LUNG	(20) 2 (10%)	(50) 2 (4%)	(48)
ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA HEMANGIOSARCOMA, METASTATIC	2 (10%)	1 (2%)	1 (2%) 1 (2%) 4 (8%)
nEnrico arconi, neralico			
EMATOPOIETIC SYSTEM			
*MULTIPLE ORGANS MALIGNANT LYMPHOMA, NOS	(20)	(50) 1 (2%)	(48) 1 (2%)
MALIG.LYMPHOMA, LYMPHOCYTIC TYPE		1 (2%)	. (22)
#SPLEEN HEMANGIOSARCOMA	(17) 1 (6%)	(42) 1 (2%)	(45) 3 (7%)
HEMANGIOSARCOMA, METASTATIC		1 (2%)	
IRCULATORY SYSTEM			
*HEART	(18)	(47)	(48)
HEMANGIOSARCOMA, METASTATIC			2 (4%)
IGESTIVE SYSTEM			
*LIVER	(20)	(50)	(47) 2 (4%)
HEPATOCELLULAR ADENOMA		1 (2%)	

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED **EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE BI (CONTINUED)

	CONTROL (UNTR) 22-2135	LOW DOSE 22-2133	HIGH DOSE 22-2131	
HEPATOCELLULAR CARCINOMA HEMANGIOSARCOMA HEMANGIOSARCOMA, METASTATIC	4 (20%) 1 (5%)	19 (38%)		
RINARY SYSTEM			2 (77)	
#KIDNEY HEMANGIOSARCOMA	(20)	(50)	(47) 1 (2%)	
*PERIRENAL TISSUE HEMANGIOSARCOMA	(20)	(50) 1 (2%)	(47)	
NDOCRINE SYSTEM				
EPRODUCTIVE SYSTEM				
*EPIDIDYMIS HEMANGIOSARCOMA	(20)	(50) 2 (4%)	(48) 29 (60%)	
ER VOUS SYSTEM				
NONE				
PECIAL SENSE ORGANS				
*SKELETAL MUSCLE HEMANGIOSARCOMA HEMANGIOSARCOMA, INVASIVE	(20)	(50)	(48) 1 (2%) 1 (2%)	
ODY CAVITIES				
*ABDOMINAL CAVITY HEMANGIOS ARCOMA, METASTATIC	(20)	(50)	(48) 1 (2%)	

 $[\]ensuremath{\mathtt{\#}}$ number of animals with tissue examined microscopically $\ensuremath{\mathtt{*}}$ number of animals necropsied

TABLE BI (CONCLUDED)

	CONTROL (UNT)	2) LOW DOSE 22-2133	HIGH DOSE 22-2131	
*MESENTERY HEPATOCELLULAR CARCINOMA, METAST			(48)	
ALL OTHER SYSTEMS				
NONE				
ANIMAL DISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY NATURAL DEATHO MORIBUND SACRIFICE SCHEDULED SACRIFICE	20	50 8 1	50 24 1	
ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	19	41	23	
TUMOR SUMMARY				
TOTAL ANIMALS WITH PRIMARY TUMORS* TOTAL PRIMARY TUMORS	6 8	31 35	46 68	
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	2 2	. 3	3	
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	5 6	29 32	45 65	
TOTAL ANIMALS WITH SECONDARY TUMORS	#	3 4	8 10	
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMORS				
TOTAL ANIMALS WITH TUMOPS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMORS				
* PRIMARY TUMORS: ALL TUMORS EXCEPT SI * SECONDARY TUMORS: METASTATIC TUMORS			DJACENT ORGAN	

TABLE B2 SUMMARY OF THE INCIDENCE OF NEOPLASMS IN FEMALE MICE TREATED WITH 5-CHLORO-o-TOLUIDINE

	CONTROL (UNTR) 22-2136		HIGH DOSE 22-2132
NIMALS INITIALLY IN STUDY NIMALS MISSING	20	50	50
NIMALS HISSING NIMALS NECROPSIED NIMALS EXAMINED HISTOPATHOLOGICALLY*	20 * 20	50 50	43 43
NTEGUMENTARY SYSTEM			
*SUBCUT TISSUE HEMANGIOSARCOMA	(20)	(50) 6 (12%)	(43) 21 (49%)
ESPIRATORY SYSTEM			
*LUNG HEPATOCELLULAR CARCINOMA, METAST	(20)	(48)	(43) 2 (5%)
ALVEOLAR/BRONCHIOLAR ADENOMA ALVEOLAR/BRONCHIOLAR CARCINOMA	1 (5%)		1 (2%) 2 (5%)
EMATOPOIETIC SYSTEM			
MULTIPLE ORGANS MALIG.LYMPHOMA, UNDIFFER-TYPE	(20)	(50) 1 (2%)	(43)
MALIG.LYMPHOMA, LYMPHOCYTIC TYPE MALIG.LYMPHOMA, HISTIOCYTIC TYPE LEUKEMIA, NOS	1 (5%)	1 (2%) 1 (2%) 1 (2%) 1 (2%)	1 (2%)
MEDIASTINUM MALIG.LYMPHOMA, LYMPHOCYTIC TYPE	(20)	(50) 1 (2%)	(43)
*SPLEEN HEMANGIOSARCOMA	(19)	(47)	(42) 1 (2%)
MESENTEPIC L. NODE MALIG.LYMPHOMA, HISTIOCYTIC TYPE	(14)	(34)	(27) 1 (4%)
SMALL INTESTINE MALIGNANT LYMPHOMA, NOS	(20) 1 (5%)	(49)	(42) 1 (2%)
MALIG.LYMPHOMA, LYMPHOCYTIC TYPE	(3%)	1 (2%)	1 (2%)

CIRCULATORY SYSTEM

NONE

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

^{**}EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE B2 (CONTINUED)

	CONTROL (UNTR) 22-2136	LOW DOSE 22-2134	HIGH DOSE 22-2132
DIGESTIVE SYSTEM			
*LIVER HEPATOCEILULAR ADENOMA HEPATOCELLULAR CARCINOMA	(20)	(50) 2 (4%) 19 (38%)	(43) 5 (12%) 26 (60%)
*DUODENUM PAPILLARY CARCINOMA	(20) 1 (5%)	(49)	(42)
RINARY SYSTEM			
#KIDNEY/CAPSULE HEMANGIOSARCOMA, METASTATIC	(20)	(48)	(43) 1 (2%)
#URINARY BLADDER HEMANGIOSARCOMA, INVASIVE	(18)	(42)	(32) 1 (3%)
NDOCRINE SYSTEM			
EPRODUCTIVE SYSTEM			
*MAMMARY GLAND ADENOMA, NOS	(20)	(50)	(43) 1 (2%)
#UTERUS ENDOMETRIAL STROMAL POLYP HEMANGIOSARCOMA, INVASIVE	(20)	(48) 1 (2%)	(39) 2 (5%)
ERVOUS SYSTEM			
NONE			
SPECIAL SENSE ORGANS			
*HARDERIAN GLAND ADENOMA, NOS	(20)	(50) 1 (2%)	(43)
MUSCULOSKELETAL SYSTEM			
NONE			

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE B2 (CONTINUED)

				:
	CONTROL (UNTR) 22-2136	LOW DOSE 22-2134	HIGH DOSE 22-2132	
BODY CAVITIES				
*MEDIASTINUM HEMANGIOSARCOMA, METASTATIC	(20)	(50)	(43) 1 (2%)	
ALL OTHER SYSTEMS				
*MULTIPLE ORGANS OSTEOSARCOMA, METASTATIC	(20)	(50) 1 (2%)	(43)	
THORACIC CAVITY HEMANGIOSARCOMA, METASTATIC			1	
ANIMAL DISPOSITION SUMMARY				
ANIMALS INITIALLY IN STUDY NATURAL DEATHƏ MORIBUND SACRIFICE SCHEDULED SACRIFICE	20 2	50 7	50 12 1	
ACCIDENTALLY KILLED TERMINAL SACRIFICE ANIMAL MISSING	18	4 3	31 6	
@ INCLUDES AUTOLYZED ANIMALS				

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE B2 (CONCLUDED)

	CONTROL (UNTR) 22-2136		
OR SUMMARY			
TOTAL ANIMALS WITH PRIMARY TUNCRS* TOTAL PRIMARY TUNORS	4	31 35	38 61
TOTAL ANIMALS WITH BENIGN TUMORS TOTAL BENIGN TUMORS	1	4 4	7
TOTAL ANIMALS WITH MALIGNANT TUMORS TOTAL MALIGNANT TUMORS	3	29 31	36 54
TOTAL ANIMALS WITH SECONDARY TUMORS OF TOTAL SECONDARY TUMORS		1	5 8
TOTAL ANIMALS WITH TUMORS UNCERTAIN- BENIGN OR MALIGNANT TOTAL UNCERTAIN TUMOFS			
TOTAL ANIMALS WITH TUMORS UNCERTAIN- PRIMARY OR METASTATIC TOTAL UNCERTAIN TUMOFS			

^{*} SECONDARY TUMORS: METASTATIC TUMORS OR TUMOPS INVASIVE INTO AN ADJACENT ORGAN



APPENDIX C

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN RATS TREATED WITH 5-CHLORO-o-TOLUIDINE



TABLE CI SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE RATS TREATED WITH 5-CHLORO-o-TOLUIDINE

	CONTROL (UNTR) 11-1135	LOW DOSE 11-1133	HIGH DOSE 11-1131	
ANIMALS INITIALLY IN STUDY ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY**	20 20 20	50 50 50	50 · 50 50	
INTEGUMENTARY SYSTEM				
NONE				
RESPIRATORY SYSTEM				
*NASAL CAVITY KERATOSIS FOLLICULARIS	(20)	(50) 1 (2%)	(50)	
#LUNG/BRONCHIOLE HYPERPLASIA, EPITHELIAL	(20)	(49) 1 (2系)	(50)	
*LUNG CONGESTION, NOS HEMORRHAGE INFLAMMATION, NOS INFLAMMATION, INTERSTITIAL	(20)	(49) 1 (2%) 1 (2%) 1 (2%) 1 (2%) 1 (2%)	(50)	
INFLAMMATION, ACUTE PNEUMONIA, CHRONIC MURINE INFLAMMATION, CHRONIC INFLAMMATION, CHRONIC FOCAL FIBROSIS	6 (30%) 7 (35%) 1 (5%)	1 (2%) 1 (2%) 1 (2%)	6 (12%)	
HEMATOPOIETIC SYSTEM				
#BONE MARROW HYPERPLASIA, HEMATOPOIETIC	(17)	(35) 1 (3%)	(48)	
#SPLEEN CONGESTION, NOS HEMOSIDEROSIS ERYTHROPHAGOCYTOSIS HYPERPLASIA, RETICULUM CELL	(20)	(49) 2 (4%) 2 (4%) 1 (2%) 1 (2%)	(50) 6 (12%) 5 (11%)	

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIZD **EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE CI (CONTINUED)

	CONTROL (UNTR) 11-1135	10W DOSE 11-1133	HIGH DOSE 11-1131	
HEM ATOPOLESIS MYELOPOLESIS	2 (10%)	2 (4%) 1 (2%)	3 (6%)	••••••
*LYNPH NODE	(17)	(42)	(35)	
INFLAMMATION, HEMORRHAGIC HYPERPLASIA, RETICULUM CELL	1 (6%)		1 (3¾) 2 (6%)	
*MESENTERIC L. NODE HYPERPLASIA, RETICULUM CELL HYPERPLASIA, LYMPHOID	(17)	(42) 1 (2%) 1 (2%)	(35) 3 (9%)	
IRCULATORY SYSTEM				
MYOCA RDIUM	(20)	(50)	(50)	
INFLAMMATION, FOCAL INFLAMMATION, ACUTE		1 (2%)	1 (2%)	
INFLAMMATION, CHRONIC FIBROSIS	2 (1)%)	1 (2%) 1 (2%)	1 (2%)	
FIBROSIS, FOCAL	2 (13%)	1 (2%)	2 (4%)	
FENDOCARDIUM INFLAMMATION, ACUTE	(20)	(50) 1 (2%)	(50)	
IGESTIVE SYSTEM				
SALIVARY GLAND	(19)	(45)	(47)	
ATROPHY, NOS		1 (2%)	1 (2%)	
LIVER	(20)	(48)	(50)	
CONGESTION, NOS INFLAMMATION, ACUTE			1 (2%) 1 (2%)	
CIRRHOSIS, NOS		1 (2%) 1 (2%)		
NECROSIS, NOS METAMORPHOSIS FATTY		3 (6%)	11 (22%)	
LIPOIDOSIS			1 (2%)	
FOCAL CELLULAR CHANGE CYTOLOGIC DEGENERATION	1 (5%)	1 (2%)	1 (2%)	
ANGIECTASIS		1 (2%)	1 (2%)	
HEM ATOPOLESIS			1 (2%)	
*LIVER/CENTRILOBULAR CONGESTION, NOS	(20)	(48) 1 (2%)	(50)	
BILE DUCT	(20)	(48)	(5))	
HYPERPLASIA, NOS	1_1581		2 (4%)	

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE CI (CONTINUED)

	CONTROL (UNTR) 11-1135		HIGH DOSE 11-1131
HYPERPLASIA, FOCAL		2 (4%)	
*PANCREAS FIBROSIS, DIFFUSE	(20)	(45) 1 (2%)	(45)
ATROPHY, NOS			1 (2%)
*PANCREATIC ACINUS ATROPHY, NOS	(20) 1 (5%)	(45)	(45) 4 (9%)
*ESOPHAGUS HYPERPLASIA, NOS	(14)	(30) 1 (3%)	(42)
*STOMACH INFLAMMATION, ACUTE	(20)	(50) 1 (2%)	(50)
#SMALL INTESTINE	(20)	(49)	(50)
ATROPHY, NOS HYPERPLASIA, LYMPHOID	1 (5%) 1 (5%)		10 (20%)
#LARGE INTESTINE NEM AT ODIA SIS	(20) 1 (5%)	(49)	(49) 3 (6%)
*COLON INFLAMMATION, CHRONIC HYPERPLASIA, LYMPHOID	(20)	(49)	(49) 1 (2%) 4 (8%)
URINARY SYSTEM			
#KIDNEY INPLAHMATION, NOS INPLAHMATION, INTERSTITIAL INPLAHMATION, CHRONIC GLOMERULONSPHRITIS, CHRONIC	(20) 5 (25%) 1 (5%)	(50) 2 (4%) 1 (2%) 3 (6%)	(50) 1 (2%) 1 (2%) 14 (28%) 5 (1)%)
NEPHROPATHY ARTERIOSCLEROSIS, NOS NEPHROSIS, NOS ATROPHY, NOS	3 (15%)	1 (2%) 1 (2%) 3 (6%) 1 (2%)	6 (12%)
*KIDNEY/TUBULE NEPHROSIS, NOS	(20)	(50) 2 (4%)	(50) 3 (6%)
ENDOCRINE SYSTEM			
*PITUITARYDEGENERATIONNOS	(18)	(48)	(48) 1 (2%)

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE C1 (CONTINUED)

HYPERPLASIA, CHROMOPHOBE-CELL DYSPLASIA, NOS #ADRENAL CYST, NOS HEMORRHAGIC CYST SADRENAL MEDULLA HEMORRHAGIC CYST #ADRENAL MEDULLA HEMORRHAGIC CYST #ADRENAL MEDULLA HEMORRHAGIC CYST #ADRENAL MEDULLA HEMORRHAGIC CYST HEMORRHAGIC CYST #ADRENAL MEDULLA HEMORRHAGIC CYST HEMORRHAGIC CHARL HEMORRHAGIC CYST HEMORRHAGIC CYST HEMORRHAGIC CHARL HEMORRHAGIC CHARL HEMORRHAGIC CYST HEMORRHAGIC CYST HEMORRHAGIC CHARL HEMORRHAGIC CYST HEMORRHAGIC		CONTROL (UNTR)		HIGH DOSE	
DYSPLASIA, NOS ADDE NAL		11-1135	11-1133	11-1131	
ADREMAL	HYPERPLASIA, CHROMOPHOBE-CELL			1 (2%)	
CYST, NOS HEMORRHAGIC CYST INFARCT, NOS HEMORRHAGIC CYST INFARCT, NOS HYPERPLASIA, NOS HYPERPLASIA, NOS RADRENAL MEDULLA HEMORRHAGIC CYST DEGENERATION, NOS CALCIFICATION, NOS HYPERPLASIA, NOS RATHYROID HYPERPLASIA, NOS HYPERPLASIA, NOS RATHYROID HYPERPLASIA, C-CELL RADRENAL CYST PRODUCTIVE SYSTEM REPRODUCTIVE SYSTEM					
CYST, NOS HEMORRHAGIC CYST INFARCT, NOS HEMORRHAGIC CYST INFARCT, NOS HYPERPLASIA, NOS HYPERPLASIA, NOS RADRENAL MEDULLA HEMORRHAGIC CYST DEGENERATION, NOS CALCIFICATION, NOS HYPERPLASIA, NOS RATHYROID HYPERPLASIA, NOS HYPERPLASIA, NOS RATHYROID HYPERPLASIA, C-CELL RADRENAL CYST PRODUCTIVE SYSTEM REPRODUCTIVE SYSTEM	ADR FN AT	(20)	(49)	(48)	
HEMORRHAGIC CYST 1 (2%)		(20)	(42)		
INFARCT, NOS HYPERPLASIA, NOS HYPERPLASIA, NOS #ADRENAL MEDULLA HEMORRHAGIC CYST DEGENERATION, NOS CALCIFICATION, NOS CALCIFICATION, NOS HYPERPLASIA, NOS #THYROID HYPERPLASIA, NOS #THYROID HYPERPLASIA, NOS #THYROID HYPERPLASIA, C-CELL #PANCREATIC ISLETS FIBROSIS #PEROSIS ##PEROSIS ##PEROSIS ##PEROJUCTIVE SYSTEM ##PERPLASIA, NOS ##PERPLASIA, NOS ##PERPLASIA, NOS ##PERPLASIA, NOS ##PERPLASIA, NOS ##PERPLASIA, PEITHELIAL HYPERPLASIA, PEITHELIAL HYPERPLASIA, CYSTIC ##COAGULATING GLAND HYPERPLASIA, NOS ##TESTIS ##PESTIS ##PERPLASIA, NOS ##PESTIS ##PESTIS ##PESTIS ##PERPLASIA, NOS ##PERP		3 (15%)	2 (4%)		
### HYPERPLASIA, NOS ###################################	INFARCT, NOS	` '		` '	
HEMORRHAGIC CYST 1 (5%) 1 (2%)	HYPERPLASIA, NOS			1 (2%)	
HEMORRHAGIC CYST 1 (5%) 1 (2%)	#ADRENAL MEDULLA	(20)	(49)	(48)	
DECENERATION, NOS CALCIPICATION, NOS CALCIPICATION, NOS HYPERPLASIA, NOS #THYROID HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, C-CELL #PANCREATIC ISLETS FIBROSIS #PRODUCTIVE SYSTEM #PROSTATE INFLAMMATION, SUPPURATIVE INFLAMMATION, CHRONIC HYPERPLASIA, NOS HYPERPLASIA, EPITHELIAL HYPERPLASIA, CYSTIC #COAGULATING GLAND HYPERPLASIA, NOS #TESSIS #COAGULATING GLAND HYPERPLASIA, NOS #TESSIS #TESSIS #TESSIS #TESSIS #TESSIS/TUBULE DECENERATION, NOS #TESS			(42)	(40)	
CALCIFICATION, NOS HYPERPLASIA, NOS 1 (2%) #THYROID HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, C-CELL 1 (2%) #PANCREATIC ISLETS FIBROSIS 1 (5%) #PRODUCTIVE SYSTEM #PROSTATE INFLAMMATION, SUPPURATIVE INFLAMMATION, CHBONIC HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, EPITHELIAL HYPERPLASIA, CYSTIC *COAGULATING GLAND HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, NOS *COAGULATING GLAND HYPERPLASIA, NOS #TESTIS DEGENERATION, NOS ATROPHY, NOS #TESTIS/TUBULE DEGENERATION, NOS		. (5%)	1 (2%)		
HYPERPLASIA, NOS #THYROID HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, C-CELL #PANCREATIC ISLETS FIBROSIS #PRODUCTIVE SYSTEM #PROSTATE INPLAMMATION, SUPPURATIVE INPLAMMATION, CHRONIC HYPERPLASIA, NOS HYPERPLASIA, EPITHELIAL HYPERPLASIA, CYSTIC #COAGULATING GLAND HYPERPLASIA, NOS #TESTIS DEGENERATION, NOS ATROPHY, NOS #TESTIS/TUBULE DEGENERATION, NOS	•				
#THYROID HYPERPLASIA, NOS HYPERPLASIA, C-CELL #PANCREATIC ISLETS FIBROSIS #PRODUCTIVE SYSTEM #PROSTATE INFLAMMATION, SUPPURATIVE INFLAMMATION, CHRONIC HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, EPITHELIAL HYPERPLASIA, CYSTIC #COAGULATING GLAND HYPERPLASIA, NOS BEGENERATION, NOS ATROPHY, NOS #TESTIS DEGENERATION, NOS ATROPHY, NOS #TESTIS/TUBULE DEGENERATION, NOS				1 (2%)	
#YPERPLASIA, NOS HYPERPLASIA, C-CELL #PANCR FATIC ISLETS FIBROSIS #PROSTATE #PROSTATE INFLAMMATION, SUPPURATIVE INFLAMMATION, CHRONIC HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, EPITHELIAL HYPERPLASIA, CYSTIC #COAGULATING GLAND HYPERPLASIA, NOS #COAGULATING GLAND HYPERPLASIA, NOS #TESTIS DEGENERATION, NOS ATROPHY, NOS #TESTIS/TUBULE DEGENERATION, DEGENERATION, DEGENERATION, DEGENERATION, DEGENERATION			, , , , , ,	. (,	
HYPERPLASIA, NOS HYPERPLASIA, C-CELL #PANCREATIC ISLETS FIBROSIS #PROSTATE INFLAMMATION, SUPPURATIVE INFLAMMATION, CHRONIC HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, EPITHELIAL HYPERPLASIA, CYSTIC #COAGULATING GLAND HYPERPLASIA, NOS #COAGULATING GLAND HYPERPLASIA, NOS #TESTIS DEGENERATION, NOS ATROPHY, NOS #TESTIS/TUBBLE DEGENERATION, DEGENERATION, DEGENERATION, DEGENERATION, DEGENERATION, DEGENERATION, DEGENERATION, DEGENERATION, DEGEN	#THYROID	(18)	(44)	(24)	
#PANCREATIC ISLETS (20) (45) (45) PIBROSIS 1 (5%) EPRODUCTIVE SYSTEM #PROSTATE (1) (44) (42) INFLAMMATION, SUPPURATIVE 1 (2%) INFLAMMATION, CHRONIC 1 (2%) HYPERPLASIA, NOS 1 (100%) 2 (5%) 3 (7%) HYPERPLASIA, EPITHELIAL 1 (2%) HYPERPLASIA, CYSTIC 3 (7%) *COAGULATING GLAND (20) (50) (50) HYPERPLASIA, NOS 1 (2%) *TESTIS (20) (50) (50) DEGENERATION, NOS 1 (2%) ATROPHY, NOS 2 (4%) *TESTIS/TUBULE (20) (50) (50) DEGENERATION, NOS 1 (2%) *TESTIS/TUBULE (20) (50) (50) DEGENERATION, NOS 1 (2%) ERVOUS SYSTEM	HYPERPLASIA, NOS	• •			
#PROST ATE	HYPERPLASIA, C-CELL		1 (2%)		
#PROSIS 1 (5%) #PROSTATE (1) (44) (42) INFLAMMATION, SUPPURATIVE 1 (2%) INFLAMMATION, CHRONIC 1 (2%) HYPERPLASIA, NOS 1 (100%) 2 (5%) 3 (7%) HYPERPLASIA, EPITHELIAL 1 (2%) HYPERPLASIA, CYSTIC 3 (7%) *COAGULATING GLAND (20) (50) (50) HYPERPLASIA, NOS 1 (2%) *TESTIS (20) (50) (50) #TESTIS (20) (50) (50) #TESTIS (24%) #TESTIS/TUBULE DEGENERATION, NOS (20) (50) (50) #TESTIS/TUBULE (20) (50) (50) #TESTIS/TUBULE (20) (50) (50) #TESTIS/TUBULE (20) (50) (50)	ADANCE PATTO ISI PTS	(20)	(45)	(45)	
#PROSTATE (1) (44) (42) INFLAMMATION, SUPPURATIVE 1 (2%) INFLAMMATION, CHRONIC 1 (2%) HYPERPLASIA, NOS 1 (100%) 2 (5%) 3 (7%) HYPERPLASIA, EPITHELIAL 1 (2%) HYPERPLASIA, CYSTIC 3 (7%) *COAGULATING GLAND (20) (50) (50) HYPERPLASIA, NOS 1 (2%) *TESTIS (20) (50) (50) DEGENERATION, NOS 1 (2%) ATROPHY, NOS 2 (4%) *TESTIS/TUBULE (20) (50) (50) DEGENERATION, NOS 1 (2%) *TESTIS/TUBULE (20) (50) (50) DEGENERATION, NOS 1 (2%) *TESTIS/TUBULE (20) (50) (50) DEGENERATION, NOS 1 (2%)			(13)	(1.5)	
INFLAMMATION, CHRONIC HYPERPLASIA, NOS HYPERPLASIA, NOS HYPERPLASIA, EPITHELIAL HYPERPLASIA, CYSTIC *COAGULATING GLAND HYPERPLASIA, NOS *TESTIS DEGENERATION, NOS ATROPHY, NOS *TESTIS/TUBULE DEGENERATION, NOS DEGENERATION, NOS DEGENERATION, NOS TESTIS/TUBULE DEGENERATION, NOS DEGENERATION, NOS TESTIS/TUBULE DEGENERATION, NOS	#PROSTATE	(1)	(44)		
HYPERPLASIA, NOS HYPERPLASIA, EPITHELIAL HYPERPLASIA, CYSTIC *COAGULATING GLAND HYPERPLASIA, NOS *COAGULATING GLAND HYPERPLASIA, NOS (20) (50) HYPERPLASIA, NOS (20) (50) *TESTIS DEGENERATION, NOS ATROPHY, NOS *TESTIS/TUBULE DEGENERATION, NOS DEGENERATION, NOS *TESTIS/TUBULE DEGENERATION, NOS *TESTIS/TUBULE DEGENERATION, NOS ERVOUS SYSTEM					
HYPERPLASIA, EPITHELIAL HYPERPLASIA, CYSTIC *COAGULATING GLAND HYPERPLASIA, NOS (20) (50) HYPERPLASIA, NOS (20) (50) (50)		1 (100%)	2 (5%)		
HYPERPLASIA, CYSTIC . 3 (7%) *COAGULATING GLAND (20) (50) (50) HYPERPLASIA, NOS (20) (50) (50) *TESTIS (20) (50) (50) DEGENERATION, NOS (20) ATROPHY, NOS (20) (50) (50) *TESTIS/TUBULE (20) (50) (50) DEGENERATION, NOS (10%) *TESTIS/TUBULE (20) (50) (50) DEGENERATION, NOS (10%)		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- (/		
#TESTIS (20) (50) (50) DEGENERATION, NOS 1 (2%) ATROPHY, NOS 2 (4%) #TESTIS/TUBULE (20) (50) (50) DEGENERATION, NOS 1 (2%) #TESTIS/TUBULE (20) (50) (50) DEGENERATION, NOS 1 (2%)					
#TESTIS (20) (50) (50) DEGENERATION, NOS 1 (2%) ATROPHY, NOS 2 (4%) #TESTIS/TUBULE (20) (50) (50) DEGENERATION, NOS 1 (2%) #TESTIS/TUBULE (20) (50) (50) DEGENERATION, NOS 1 (2%)	*COAGULATING GLAND	(20)	(50)	(50)	
DEGENERATION, NOS ATROPHY, NOS #TESTIS/TUBULE DEGENERATION, NOS (20) (50) 1 (2%) ERVOUS SYSTEM		(20)	(55)		
DEGENERATION, NOS ATROPHY, NOS #TESTIS/TUBULE DEGENERATION, NOS (20) (50) 1 (2%) ERVOUS SYSTEM	*TFSTIS	(20)	(50)	(50)	
ATROPHY, NOS #TESTIS/TUBULE DEGENERATION, NOS (20) (50) 1 (2%) DERVOUS SYSTEM		(20)	(30)		
*TESTIS/TUBULE (20) (50) (50) DEGENERATION, NOS 1 (2%) ERVOUS SYSTEM					
DEGENERATION, NOS 1 (2%) ERVOUS SYSTEM					
ERVOUS SYSTEM		(20)	(50)		
	DECENERATION NOS			1 (2%)	
#BRAIN/MENINGES (20) (49) (49)					
INPLAHMATION, SUPPURATIVE 1 (5%)		(20)	(49)	(49)	

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIZD

TABLE CI (CONCLUDED)

	CONTROL (UNTR) 11-1135	LOW DOSE 11-1133	HIGH DOSE 11-1131
BRAIN		(49)	(49)
ECIAL SENSE ORGANS			
ONE			
ULOSKELETAL SYSTEM			
ONE			
Y CAVITIES			
PERITONEUM INFLAMMATION, ACUTE INFLAMMATION, CHRONIC	(20)	(50)	(5)) 1 (2%) 1 (2%)
LEURA INFLAMMATION, CHRONIC	(20) 1 (5%)	(50)	(50)
OTHER SYSTEMS			,
ONE			
CIAL MORPHOLOGY SUMMARY			
NO LESION REPORTED		1	

^{*} NUMBER OF ANIMALS NECROPSIED

TABLE C2 SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE RATS TREATED WITH 5-CHLORO-o-TOLUIDINE

	CONTROL (UNTR)	LOW DOSE 11-1134	HIGH DOSE 11-1132	
ANIMALS INITIALLY IN STUDY	20	50	50	
ANIMALS NECROPSIED	20	50	50	
ANIMALS EXAMINED HISTOPATHOLOGICALLY*	* 20 	49	49	
NTEGUMENTARY SYSTEM				
*SUBCUT TISSUE	(20)	(50)	(5))	
PIBROUS DYSPLASIA		1 (2%)		
RESPIRATORY SYSTEM				
#TRACHEA	(17)	(45)	(46)	
INFLAMMATION, NOS	1 (6%)			
#LUNG	(20)	(48)	(48)	
ATELECIASIS CONGESTION, NOS	1 (5%)	1 (2%)		
INFLAMMATION, NOS		1 (2%)		
INFLAMMATION, INTERSTITIAL			1 (2%)	
BRONCHOPNEUMONIA, ACUTE INFLAMMATION, ACUTE		1 (2%)	1 (2¾) 1 (2¾)	
PNEUMONIA, CHRONIC MURINE	1 (5%)	4 (8%)	3 (6%)	
INFLAMMATION, CHRONIC		1 (2%)		
HYPERPLASIA, ADENOMATOUS	1 (5%)			
HEMATOPOIETIC SYSTEM				
#BONE MARROW	(12)	(37)	(44)	
HYPERPLASIA, HEMATOPOIETIC			1 (2%)	
#SPLEEN	(20)	(48)	(46)	
CONGESTION, NOS INFLAMMATION, ACUTE	5 (25%)	5 (10%)	4 (9%) 1 (2%)	
HEMOSIDEROSIS	6 (30%)	5 (10%)	6 (13%)	
ERYTHROPHAGOCYTOSIS		` '	1 (2%)	
HEM ATOPOIESIS	4 (20%)	3 (6%)	4 (9%)	
#LYMPH NODE	(13)	(35)	(44)	
HYPERPLASIA, RETICULUM CELL	2 <u>(15%)</u>	2 (6%)	1 (2兆)	

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROPSIED
**EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE C2 (CONTINUED)

	CONTROL (UNTR) 11-1136	LOW DOSE 11-1134	HIGH DOSE 11-1132	
*MESENTERIC L. NODE HYPERPLASIA, RETICULUM CELL	(13) 1 (8%)	(35) 3 (9%)	(44) 3 (7%)	
CIRCULATORY SYSTEM				
#MYOCARDIUM FIBROSIS FIBROSIS, FOCAL	(19) 1 (5%)	1 (2%)	(49) 1 (2%)	
DIGESTIVE SYSTEM				
*LIVER INFLAMMATION, FOCAL INFLAMMATION, ACUTE INFLAMMATION, GRANULOMATOUS	(20)	(49) 1 (2%)	(49) 1 (2%) 1 (2%)	
NECROSIS, FOCAL METAMORPHOSIS FATTY LIPOIDOSIS FOCAL CELLULAR CHANGE CYTOLOGIC DEGENERATION	1 (5%)	1 (2%) 11 (22%) 1 (2%) 4 (8%)	1 (2%) 14 (29%) 1 (2%) 7 (14%) 1 (2%)	
HYPERPLASIA, NODULAR HYPERPLASIA, NOS HEMATOPOLESIS	1 (5%)	2 (4%)	1 (2%) 1 (2%)	
#BILE DUCT INFLAMMATION, GRANULOMATOUS HYPERPLASIA, NOS	(20) 1 (5%)	(49) 2 (4%) 1 (2%)	(49) 3 (6%)	
*PANCREAS INFLAMMATION ACUTE AND CHRONIC NECROSIS, FAT	(18)	(47) 1 (2%)	(47) 1 (2%)	
*PANCREATIC ACINUS ATROPHY, NOS	(18)	(47) 1 (2%)	(47) 1 (2%)	
#GASTRIC MUCOSA HYPERPLASIA, NOS	(20)	(49) 1 (2%)	(46)	
*SMALL INTESTINE ULCER, NOS HYPERPLASIA, LYMPHOID	(20) 1 (5%) 2 (13%)	(47) 7 (15%)	(48) 6 (13%)	
#LARGE INTESTINE NEMATODIASIS	(20)	(46) 2 (4%)	(48)	

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE C2 (CONTINUED)

	CONTROL (UNTR) 11-1136	LOW DOSE 11-1134	HIGH DOSE 11-1132	
#COLON HYPERPLASIA, LYMPHOID	(20)	(46) 2 (4%)	(48)	
RINARY SYSTEM				
#KIDNEY GLOMERULONEPHRITIS, NOS INFLAMMATION, NOS INFLAMMATION, CHRONIC GLOMERULONEPHRITIS, CHRONIC NEPHROSIS, NOS CALCINOSIS, NOS	(20) 3 (15%) 1 (5%) 2 (13%) 1 (5%)	(49) 6 (12%) 8 (16%) 2 (4%) 1 (2%)	(49) 1 (2%) 2 (4%) 5 (13%) 5 (13%)	
#KIDNEY/TUBULE NEPHROSIS, NOS	(20)	(49) 2 (4%)	(49) 2 (4%)	
*URETER CALCULUS, NOS	(20) 1 (5%)	(50)	(50)	
#URINARY BLADDER INFLAMMATION, CHRONIC HYPERPLASIA, EPITHELIAL	(18)	(47)	(44) 1 (2%) 1 (2%)	
ENDOCRINE SYSTEM				
#PITUITARY HEMORRHAGE HEMORRHAGIC CYST FIBROSIS	(20) 1 (5%) 1 (5%) 1 (5%)	(43)	(46)	
#ADRENAL CYST, NOS HEMORRHAGIC CYST LIPOIDOSIS	(20)	(48) 1 (2%) 1 (2%)	(48) 1 (2%) 1 (2%)	
#ADRENAL CORTEX HYPERPLASIA, NOS	(20)	(48) 1 (2%)	(48)	
# ADREN AL MEDULLA CYST, NOS	(20)	(48) 1 (2%)	(48)	
*THYROID CYST, NOS	(16)	(41)	(47) 1 (2%)	

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE C2 (CONTINUED)

	CONTROL (UNTR) 11-1136	LOW DOSE 11-1134	HIGH DOSE 11-1132
HYPERPLASIA, ADENOMATOUS HYPERPLASIA, C-CELL	1 (6%)	2 (5%)	1 (2%)
#THYROID FOLLICLE COLLAPSE	(16)	(41)	(47) 1 (2%)
EPRODUCTIVE SYSTEM			
*MAMMARY GLAND HYPERPLASIA, NOS DYSPLASIA, NOS	(20)	(50)	(50) 1 (2%) 1 (2%)
FIBROUS DYSPLASIA		1 (2%)	
#UTERUS INFLAMMATION, SUPPURATIVE ABSCESS, NOS	(18)	(49)	(47) 1 (2%) 1 (2%)
#UTERUS/ENDOMETRIUM HYPERPLASIA, CYSTIC	(18)	(49) 3 (6%)	(47) 1 (2%)
#OVARY/PAROVARIAN NECROSIS, FAT	(18)	(49) 1 (2%)	(47)
*OVARY CYST, NOS FOLLICULAR CYST, NOS	(18) 1 (6%)	(25) 1 (4%)	(49) 2 (4%)
ERVOUS SYSTEM			
#BRAIN ABSCESS, NOS	(20)	(48) 1 (2%)	(47)
PECIAL SENSE ORGANS			
NONE		-	
USCULOSKELETAL SYSTEM			
NONE			
BODY CAVITIES			
*MESENTERY NECROSIS, FAT	(20)	(50) 1_(2%)	(50)

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE C2 (CONCLUDED)

	CONTROL (UNTR) 11-1136	LOW DOSE 11-1134	HIGH DOSE 11-1132	
LL OTHER SYSTEMS				
SPECIAL MORPHOLOGY SUMMARY				
NO LESION REPORTED AUTO/NECROPSY/NO HISTO	2	5	3	

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

APPENDIX D

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MICE TREATED WITH 5-CHLORO-o-TOLUIDINE



TABLE DI SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN MALE MICE TREATED WITH 5-CHLORO-o-TOLUIDINE

	CONTROL (UNTR) 22-2135	LOW DOSE 22-2133	HIGH DOSE 22-2131	
ANIMALS INITIALLY IN STUDY ANIMALS MISSING	20	50	50 2	
ANIMALS DISSING ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY*	20 * 20	50 50	48 48	
INTEGUMENTARY SYSTEM				
*SKIN PLASMACYTOSIS	(20)	(50) 1 (2%)	(48)	
*SUBCUT TISSUE HEMANGIOMATOSIS	(20)	(50) 1 (2%)	(48)	
HEMORPHAGE			1 (2%)	
PESFIRATORY SYSTEM				
*LUNG PNEUMONIA, CHRONIC MURINE LEUKOCYTOSIS, NGS	(20) 2 (10%)	(50) 4 (8%)	(48) 4 (8%) 1 (2%)	
HENATOPOIETIC SYSTEM				
*80NE MARROW HYPERPLASIA, NOS	(19)	(47) 2 (4%)	(45)	
*SPLEEN HEMATOPOIESIS	(17)	(42) 3 (7%)	(45) 1 (2ਵ)	
CIRCULATORY SYSTEM				
*HEART PERIARTERITIS	(18)	(47)	(48) 1 (2%)	
*MYOCARDIUM INFLAMMATION, FOCAL FIBROSIS, FOCAL	(18)	(47) 2 (4%) 1 (2%)	(48) 2 (4%)	

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY
* NUMBER OF ANIMALS NECROPSIED
**EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE DI (CONTINUED)

	CONTROL (UNTR) 22-2135	LOW DOSE 22-2133	HIGH DOSE 22-2131	
DIGESTIVE SYSTEM				
#IIVER	(20)	(50)	(47)	
INFLAMMATION, FOCAL	2 (10%)	(55)	(, , ,	
LYMPHOCYTIC INFLAMMATORY INFILTR	1 (5%)			
ABSCESS, NOS		1 (2%)		
NECROSIS, NOS			1 (2%)	
NECROSIS, FOCAL		40 125 11	2 (4%)	
CYTOPLASMIC CHANGE, NOS		18 (36%)	11 (23%)	
HYPERPLASIA, NODULAR HYPERPLASIA, NOS			4 (9%) 2 (4%)	
HYPERPLASIA, FOCAL		4 (8%)	1 (2%)	
HILLERDIN, FOCAL		4 (0%)	(2//)	
#PANCREAS	(19)	(45)	(44)	
DILATATION/DUCTS	, ,	2 (4%)		
CYST, NOS		, ,	1 (2%)	
CYSTIC DUCTS		1 (2%)		
PERIARTERITIS		1 (2%)	1 (2%)	
*PANCREATIC ACINUS	(19)	(45)	(44)	
ATROPHY, NOS	1 (5%)	3 (7%)	1 (2%)	
#CDOM LOG	(20)	440)	1463	
*STOMACH INFLAMMATION, ACUTE	(20) 1 (5%)	(49)	(46)	
INTERNMENTION, ROOTE	1 (3%)			
*LARGE INTESTINE	(20)	(48)	(43)	
NEMATODIASIS	9 (45%)	1 (2%)	1 (2%)	
JRINARY SYSTEM				
*KIDNEY	(20)	(50)	(47)	
MINERALIZATION		2 (4%)	1 (2%)	
HYDRONEPHROSIS			2 (4%)	
GLOMERULONEPHRITIS, NOS		2 (4%)	11 (23%)	
INFLAMMATION, FOCAL		1 (2%)	1 (2%)	
SCAR		1 (2%)	4 40%	
PERIARTERITIS		4 (25)	1 (2%)	
HEMOSIDEROSIS		1 (2%)	9 (19%)	
*KIDNEY/TUBULE	(20)	(50)	(47)	
NECROSIS, NOS			1 (2%)	

ENDOCPINE SYSTEM

NONE

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE DI (CONTINUED)

	CONTROL (UNTR) 22-2135	LOW DOSE 22-2133	HIGH DOSE 22-2131
PRODUCTIVE SYSTEM			
SEMINAL VESICLE INPLAMMATION, ACUTE	(20)	(50)	(48) 1 (2%)
TESTIS MINERALIZATION	(18)	(50) 1 (2%)	(46)
TESTIS/TUBULE DEGENERATION, NOS	(18)	(50) 2 (4%)	(46) 4 (9%)
EPIDIDYMIS HEMANGIOMATOSIS	(20)	(50) 1 (2%)	(48)
R VOUS SYSTEM			
BRAIN CORPORA AMYLACEA	(20) 6 (30%)	(48) 24 (50%)	(47) 13 (29%)
CEREBELLUM HYDROCEPHALUS, NOS		(48)	(47) 1 (2%)
RCIAL SENSE ORGANS			
NONE			
CULOSKELETAL SYSTEM			
SKELETAL MUSCLE INFLAMMATION, NOS	(20) 1 (5%)	(50)	(48)
DY CAVITIES			
MESENTERY STEATITIS	(20)	(50) 1 (2 %)	(48)
INFLAMMATION ACUTE PUSTULAR NECROSIS, FAT	1 (5%)	1 (2%)	
L OTHER SYSTEMS			
OMENTUM PLASMA-CELL INFILTRATE			

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED HICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE DI (CONCLUDED)

	CONTROL (UNTR) 22-2135	LOW DOSE 22-2133	HIGH DOSE 22-2131	
PECIAL MORPHOLOGY SUMMARY				
	tı			

^{*} NUMBER OF ANIMALS WITH TISSU: * NUMBER OF ANIMALS NECROPSIED

TABLE D2

SUMMARY OF THE INCIDENCE OF NONNEOPLASTIC LESIONS IN FEMALE MICE TREATED WITH
5-CHLORO-o-TOLUIDINE

	CONTROL (UNTR) 22-2136	LOW DOSE 22-2134	HIGH DOSE 22-2132	
	20	50	50 6	
ANIMALS HISSING ANIMALS NECROPSIED ANIMALS EXAMINED HISTOPATHOLOGICALLY*	20 * 20	50 50	43 43	
NTEGUMENTARY SYSTEM				
NONE				
RESPIRATORY SYSTEM				
*LUNG CONGESTION, NOS EDEMA, NOS	(20) 1 (5%)	(48) 1 (2%) 1 (2%)	(43)	
HEMORRHAGE PNEUMONIA, CHRONIC MURINE HISTIOCYTOSIS	4 (20%)	15 (31%)	1 (2%) 3 (7%) 1 (2%)	
HEMATOPOIETIC SYSTEM				
*BONE MARROW MYELOSCLEROSIS	(19) 7 (37%)	(48) 42 (88%)	(37) 32 (86%)	
*SPLEEN HEMOSIDEROSIS	(19)	(47) 1 (2%)	(42)	
HYPERPLASIA, LYMPHOID HEMATOPOIESIS	2 (11%)	2 (4%) 1 (2%)		
*BRONCHIAL LYMPH NODE SCLEROSIS	(14)	(34)	(27) 1 (4%)	
CIRCULATORY SYSTEM				
*HEART MINERALIZATION	(20)	(47) 1 (2%)	(42)	
ABSCESS, NOS	1 (5%)	, (20)		
*CARDIAC VALVE HELANIN	(20)	(47) 1 (2%)	(42)	

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

^{**}EXCLUDES PARTIALLY AUTOLYZED ANIMALS

TABLE D2 (CONTINUED)

	CONTROL (UNTR) 22-2136	LOW DOSE 22-2134	HIGH DOSE 22-2132	
DIGESTIVE SYSTEM				
*INTESTINAL TRACT HYPERPLASIA, LYMPHOID	(20)	(50)	(43) 1 (2%)	
#LIVER HEMANGIOMATOSIS HEMORRHAGIC CYST LYMPHOCYTIC INFLANMATORY INFILTR NECROSIS, NOS NECROSIS, FOCAL CYTOPLASMIC CHANGE, NOS ANGIECTASIS HEMATOPOIESIS *PANCREAS DILATATION/DUCTS *PANCREATIC ACINUS ATROPHY, NOS	(20)	(50) 1 (2%) 1 (2%) 1 (2%) 10 (20%) 1 (2%) 1 (2%) (45) (45)	(43) 1 (2%) 1 (2%) 7 (16%) (41) 1 (2%) (41) 2 (5%)	
#LARGE INTESTINE NEMATODIASIS	(20) 1 (5%)	(48)	(43)	
URINARY SYSTEM				
*KIDNEY MINERALIZATION GLOMERULONEPHRITIS, NOS INPLAMMATION, POCAL LYMPHOCYTIC INFLAMMATORY INFILTR INPLAMMATION, CHRONIC HEMOSIDEPOSIS	1 (5%)	(49) 2 (4%) 1 (2%)	(43) 3 (7%) 1 (2%) 2 (5%)	
ENDOCRINE SYSTEM				
NONE				
REPRODUCTIVE SYSTEM				
#UTERUS HEMANGIOMATOSIS	(20)	(48) 1 (2 5)	(39)	

[#] NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE D2 (CONTINUED)

	CONTROL (UNTR) 22-2136		HIGH DOSE 22-2132	
CYST, NOS PYOMETRA		9 (19%) 4 (8%)	11 (28%) 1 (3%)	
*UTERUS/ENDOMETRIUM CYST, NOS INFLAMMATION, NOS INFLAMMATION, VESICULAR	(20) 2 (10%)	(48) 1 (2%) 1 (2%)	(39) 1 (3%)	
HYPERPLASIA, NOS HYPERPLASIA, CYSTIC	1 (5%) 3 (15%)	8 (17%)	1 (3%)	
#OVARY CYST, NOS PAROVARIAN CYST INFLAMMATION, SUPPURATIVE	(15) 1 (7%)	(36) 4 (11%) 2 (6%)	(26) 1 (4%) 1 (4%) 1 (4%)	
NERVOUS SYSTEM				
*BRAIN/MENINGES INFLAMMATION, NOS	(20)	(49)	(41) 1 (2%)	
#BRAIN INFLAMMATION, FOCAL CORPORA AMYLACEA	(20) 4 (20%)	(48) 12 (25%)	(41) 1 (2%) 14 (34%)	
SPECIAL SENSE ORGANS				
NON E				
MUSCULOSKELETAL SYSTEM				
*SKELETAL MUSCLE INFLAMMATION, ACUTE PARASITISM	(20) 1 (5%) 1 (5%)	(50)	(43)	
BODY CAVITIES				
*MESENTERY MINERALIZATION	(20)	(50)	(43) 1 (2%)	
ALL OTHER SYSTEMSNONE				

^{*} NUMBER OF ANIMALS WITH TISSUE EXAMINED MICROSCOPICALLY * NUMBER OF ANIMALS NECROPSIED

TABLE D2 (CONCLUDED)

1 6 1	
LY	6 1

Review of the Bioassay of 5-Chloro-O-Toluidine* for Carcinogenicity by the Data Evaluation/Risk Assessment Subgroup of the Clearinghouse on Environmental Carcinogens

October 25, 1978

The Clearinghouse on Environmental Carcinogens was established in May, 1976, in compliance with DHEW Committee Regulations and the Provisions of the Federal Advisory Committee Act. The purpose of the Clearinghouse is to advise the Director of the National Cancer Institute (NCI) on its bioassay program to identify and to evaluate chemical carcinogens in the environment to which humans may be exposed. members of the Clearinghouse have been drawn from academia, industry, organized labor, public interest groups, and State health officials. Members have been selected on the basis of their experience in carcinogenesis or related fields and, collectively, provide expertise in chemistry, biochemistry, biostatistics, toxicology, pathology, and epidemiology. Representatives of various Governmental agencies participate as ad hoc members. The Data Evaluation/Risk Assessment Subgroup of the Clearinghouse is charged with the responsibility of providing a peer review of reports prepared on NCI-sponsored bioassays of chemicals studied for carcinogenicity. It is in this context that the below critique is given on the bioassay of 5-Chloro-o-toluidine for carcinogenicity.

The reviewer for the report on the bioassay of 5-Chloro-O-toluidine said that, under the conditions of test, the compound was carcinogenic in both sexes of treated mice and that in rats the evidence suggested a carcinogenic effect but was not conclusive. He added that the results from the bioassay suggest that 5-Chloro-O-toluidine would pose a potential carcinogenic risk for humans.

In response to a question, a Program staff member commented that the incidence of adrenal tumors in treated male rats was not statistically significant based on a comparison with matched control animals.

There was no objection to a recommendation that the report on the bioassay of 5-Chloro-o-toluidine be accepted as written.

Clearinghouse Members Present:

Arnold L. Brown (Chairman), University of Wisconsin Medical School Joseph Highland, Environmental Defense Fund William Lijinsky, Frederick Cancer Research Center Henry Pitot, University of Wisconsin Medical Center Verne A. Ray, Pfizer Medical Research Laboratory Kenneth Wilcox, Michigan State Health Department

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^{*} Subsequent to this review, changes may have been made in the bioassay report either as a result of the review or other reasons. Thus, certain comments and criticisms reflected in the review may no longer be appropriate.









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